

Seville Primary Care Service Area

Executive Summary

Summarizes the Site, Parking, Facility Size, Staff and Contract Health Dollars necessary for the Service Delivery Plan in 2015. Identifies the Direct Care Services Offered to include highlighting any new services. Identifies the communities and population served for each service.

The second page of the Executive Summary documents the priority resource issues as identified through the Master Planning process.

Historical Utilization

Documents 3 years of RPMS and contract care workloads provided to the user population of the Service Delivery Area by product line and specialty.

Market Assessment

Compares the Historical Workload to the Health System Planning software and to national averages of patient care utilization, projecting future workloads based upon the worst case of these three planning scenarios. Also documents the percentage of care that will require contracting due to acuity and the quantity of care that can potentially be served by the direct care system.

Service Delivery Plan

Recommended service delivery plan by product line based upon projected workload, key characteristics, patient classification and tribal and IHS input.

Resource Allocation

Quantifies the necessary space and key characteristics for the Service Delivery Plan and compares them against existing resources. Also tabulates necessary contract health dollars based on the delivery plan.



Executive Summary

Seville Primary Ca	re Service	e Area		Driving ⁻	Time and I	Jser Pop		Re	source Su	mmary	
									Existing	Need	%
							IHS GSN	Supportable	0	1,055	0.0%
								I Gross Sq	0	1,168	0.0%
								ing Spaces	0	41	0.0%
							Site	(Hectares)	0.00	0.0	0.0%
							IHS Staf	Supportable	0.0	31.0	0.0%
							Serv	rice Unit tract HIth \$	0		
								Contract Hith		0	
							J	S	ervice Sun	nmary	
								Family Pra	actice		
								Dental			
								Mental He			
								Social Ser Visiting P		nale	
								Visiting i	101633101	Psychi	atry (V
								Clinical La	ab		
								Pharmacy	1		
								Preventive	e Care		
								CHR			
	Prima	ary Care Service	Area Comm	unities							
Seville, Cut Bank	1 111116	ary care cervice	Alea Collini	umues							
		Population S			_						
2001 User Pop	801	Growth Rate 2015 by		2015 Us	ser Pop	899					
0-14	241	15-44 421		157	65+	80					
		Average									
Service Area	0.0	Billings	26.7	U	SA	36.0					
Exp	oanded Se	ervice Area #1		2015 U	ser Pop	899					
Services											
Communities											
	oanded Se	ervice Area #2		2015 U	ser Pop	899					
Services					•						
0											

Communities



Executive Summary

	Services & Resourcing Priorities
1	Initiate and Develop PJD/POR for new Seville Health Center
2	Plan interim renovation for existing Tribal Asset
3	Initiate visiting Primary Care Provider Practice
4	Initiate Visiting Dental Care Practice
5	Acquire mobile dental equipment for interim solution
6	Establish PHN presence in Community
7	Establish Business Office support team
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Executive Summary

	Campus Infrastructure Priorities
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	Functional Deficiencies
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Historical Workloads



Historical Workloads

Historical Workloads according to RPMS, Contract Health and Questionnaire data.

	D	irect or Trib	al Health Ca	ıre	Contract Health Care					
Discipline	1999	2000	2001	Average	1999	2000	2001	Average	% Contract Care	
		Provider 1	/isits Only			Р	rovider Visits	Only		
Primary Care										
Family Practice	1,457	1,431	1,337	1,408	0	1	0	0	0.0%	
Internal Medicine	33	3	78	38	0	0	0	0	0.0%	
Pediatric	235	215	227	226	0	0	0	0	0.0%	
Ob/Gyn	263	250	232	248	1	2	0	1	0.4%	
Emergency Care										
Emergency/Urgent	248	259	262	256	0	0	0	0	0.0%	
ER/Non-urgent	0	0	60	20	0	0	0	0	0.0%	
Specialty Care										
Orthopedics	11	27	7	15	14	16	10	13	47.1%	
Ophthalmology	20	19	23	21	11	12	7	10	32.6%	
Dermatology	1	0	0	0	0	2	0	1	66.7%	
General Surgery	52	50	45	49	21	19	20	20	29.0%	
Otolaryngology	9	15	9	11	12	20	8	13	54.8%	
Cardiology	7	4	11	7	3	0	3	2	21.4%	
Urology	7	12	39	19	0	0	0	0	0.0%	
Neurology	8	10	4	7	1	6	1	3	26.7%	
Nephrology	0	3	0	1	1	0	2	1	50.0%	
Allergy	0	0	0	0	0	0	0	0	0%	
Pulmonology				^	^			^	00/	
Gerontology										
Gastroenterology	N	o Provide	r Codes	within RP	MS Syste	m for the	se types	of Specia	alist.	
Rheumatology					,		7			
Oncology				_	_					
Pediatric-Genetics	0	0	0	0	0	0	0	0	0%	
Traditional Healing	0	0	0	0	0	0	0	0	0%	
Totals	2,351	2,298	2,334	2,328	64	78	51	64	2.7%	
Direct & Tribal Care + Contract Care	2,415	2,376	2,385	2,392						

 $^{^{\}star}\ \mathsf{Provider}\ \mathsf{Visits}\ \mathsf{-}\ \mathsf{Document}\ \mathsf{visits}\ \mathsf{to}\ \mathsf{a}\ \mathsf{Physician}, \mathsf{Nurse}\ \mathsf{Practitioner}, \mathsf{Midwife}, \mathsf{and}\ \mathsf{or}\ \mathsf{Physician}\ \mathsf{Assistant}.$

Other	Ambu	latory	Caro	Services
Other	Allıbu	ialuiv	Care	Sel vices

Dental Service Minutes	0	0	0	0	0	0	0	0	0%
Optometry Visits	190	148	154	164	5	2	0	2	1.4%
Podiatry Visits	65	48	113	75	3	8	4	5	6.2%
Dialysis Patients				0	0	0	0	0	0%
Audiology Visits	91	105	123	106	7	6	2	5	4.5%
Outpatient Behavioral				_					
Health									
Mental Health Visits	0	0	0	0	7	3	2	4	100.0%
Psychiatry	21	40	43	35	3	4	0	2	6.3%
Social Services Visits	0	0	0	0	0	0	0	0	0%
Alcohol & Substance Abuse Visits	0	0	0	0	0	0	0	0	0%
BH Visit Totals	21	40	43	35	10	7	2	6	15.4%

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Historical Workloads



Historical Workloads

Historical Workloads according to RPMS, Contract Health and Questionnaire data.

		Direct or Trib	al Health Ca	ıre					
Discipline	1999	2000	2001	Average	1999	2000	2001	Average	% Contract Care
Inpatient Care									
Labor & Delivery Births	12	14	10	12	1	1	0	1	5.3%
Obstetrics Patient Days	30	30	23	28	3	2	0	2	5.7%
Neonatology Patient Days	18	21	17	19	0	2	0	1	3.4%
Pediatric Patient Days	12	10	3	8	13	1	9	8	47.9%
Adult Medical Patient Days									
Cardiology	16	8	0	8	27	4	7	13	61.3%
Endocrinology	5	4	6	5	0	4	0	1	21.1%
Gastroenterology	60	15	13	29	8	24	1	11	27.3%
General Medicine	2	5	1	3	22	12	0	11	81.0%
Hematology	3	1	0	1	0	0	0	0	0.0%
Nephrology	5	8	6	6	0	0	0	0	0.0%
Neurology	0	0	1	0	0	3	3	2	85.7%
		0		0		0			
Oncology	0	~	0	-	25	-	6	10	100.0%
Pulmonary	41	11	7	20	14	4	9	9	31.4%
Rheumatology	0	0	0	0	0	0	0	0	0%
Unknown	0	0	0	0	0	0	0	0	0%
Medical Patient Day Total	132	52	34	73	96	51	26	58	44.2%
Adult Surgical Patient Days									
Dentistry	0	0	0	0	0	0	0	0	0%
Dermatology	32	0	0	11	0	0	0	0	0.0%
General Surgery	32	19	4	18	4	0	7	4	16.7%
Gynecology	3	5	0	3	0	0	0	0	0.0%
Neurosurgery	0	0	0	0	1	0	0	0	100.0%
Ophthalmology	0	0	0	0	0	0	0	0	0%
	9	0	27	12	21	21	35	26	68.1%
Orthopedics									
Otolaryngology	0	4	1	2	7	0	0	2	58.3%
Thoracic Surgery	0	0	0	0	0	0	0	0	0%
Urology	0	0	0	0	3	0	0	1	100.0%
Vascular Surgery	0	3	0	1	35	0	0	12	92.1%
Surgical Patient Day Total	76	31	32	46	71	21	42	45	49.1%
Psychiatry Patient Days	4	3	0	2	0	15	1	5	69.6%
Medical Detox Patient Days	0	7	7	5	6	7	1	5	50.0%
Sub Acute/Transitional Care				0	0	0	0	0	0%
Inpatient Care Totals	272	154	116	181	189	99	79	122	40.4%
Direct & Tribal + Contract	461	253	195	303	NI- F	\-1- O		4	
Care	401	200	100	000	NO L	ata Sour	ce at this	time	
Substance Abuse Non- Acute	e Care								
A L H B . I . C . T			<u> </u>						061
Adult Residential Treatment	0	0	0	0	0	0	0	0	0%
Adol. Residential Treatment	0	0	0	0	0	0	0	0	0%
	_	_	_		_	e.	ē		
SA Transisitional Care	0	0	0	0	0	0	0	0	0%
Substance Abuse Totals	0	0	0	0	0	0	0	0	0%
Elder Core									
Elder Care									001
Skilled Nursing Patients				0	0	0	0	0	0%
Assisted Living Patients	0	0	0	0	0	0	0	0	0%
Hospice Patients				0	0	0	0	0	0%
Nursing Home Totals	0	0	0	0	0	0	0	0	0%

Historical Workloads



Historical Workloads

Historical Workloads according to RPMS, Contract Health and Questionnaire data.

	Direct or Tribal Health Care Contract Health Care								
Discipline	1999	2000	2001	Average	1999	2000	2001	Average	% Contract Care
Ancillary Services									
Lab Billable Tests	0	0	0	0	0	0	0	0	0%
Pharmacy Scripts	0	0	0	0	0	0	0	0	0%
Acute Dialysis Procedures	0	0	0	0	0	0	0	0	0%
Radiographic Exams	0	0	0	0	5	2	0	2	100.0%
Ultrasound Exams				0	0	0	0	0	0%
Mammography Exams				0	0	0	0	0	0%
Fluoroscopy Exams				0	0	0	0	0	0%
CT Exams				0	0	0	0	0	0%
MRI Exams	0	0	0	0	0	0	0	0	0%
Nuclear Medicine Exams	0	0	0	0	0	0	0	0	0%
Rad. Oncology Treatments	0	0	0	0	0	0	0	0	0%
Chemotherapy Treatments	0	0	0	0	0	0	0	0	0%
Physical Therapy Visits	280	280	280	280	0	0	0	0	0.0%
Occupational Therapy Visits	0	0	0	0	0	0	0	0	0%
Speech Therapy Visits	0	0	0	0	0	0	0	0	0%
Respiratory Therapy	0	0	0	0	0	0	0	0	0%
Cardiac Catherization	0	0	0	0	0	0	0	0	0%
Home Health Care Patients	0	0	0	0	0	0	0	0	0%
Minor Procedure Cases									
Endoscopy	3	4	7	5	0	0	0	0	0.0%
Outpatient Surgery Cases									
Cardiovascular	0	0	1	0	0	0	0	0	0.0%
Digestive	0	1	0	0	0	0	0	0	0.0%
Endocrine	0	0	0	0	0	0	0	0	0%
ENT	1	5	3	3	0	0	0	0	0.0%
Gynecology	2	3	3	3	0	0	0	0	0.0%
Hemic and Lymphatic	0	0	0	0	0	0	0	0	0%
Integument	1	1	2	1	0	0	0	0	0.0%
Musculoskeletal	2	5	10	6	0	0	0	0	0.0%
Nervous	0	0	0	0	0	0	0	0	0%
Ocular	0	2	2	1	0	0	0	0	0.0%
Respiratory	0	0	1	0	0	0	0	0	0.0%
Urogenital	0	0	7	2	0	0	0	0	0.0%
OP Surgical Case Total	6	17	29	17	0	0	0	0	0%
Inpatient Surgery Cases	16	16	9	14	9	8	8	8	37.9%
Surgical Case Total	22	33	38	31	9	8	8	8	21%
Direct & Tribal + Contract Care	31	41	46	39					
EMS - Pre-Hospital Resp.				0	0	0	0	0	0%
EMS - Inter Hospital Resp				0	0	0	0	0	0%

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Market Assessment

Historical vs. Market Potential - In accordance to the population, compares the Historical Workload to the US State or National Average (USNA) and IHS Health System Planning (HSP) Software. USNA are taken from a number of sources see Patient Utilization Table for sources.

Y		2001			2015		2015 DI	annina Acc	umption
Year								anning Ass	
HSP User Pop PSA		801			899		Workload w	ith Diabetes Ir	,
Discipline	3 Year History	USNA	HSP	3 Year History	USNA	HSP	Total	Direct Care	Contract Care
	Pro	vider Visits On	ly	Pro	ovider Visits Onl	ly	Pi	ovider Visits O	nly
Primary care									
Family Practice	1,409	894		1581	1,005		1,005	1,005	0
Internal Medicine	38	348		43	390		390	390	0
Pediatric	226	414		253	464		464	464	0
Ob/Gyn	249	328	0.000	280	370	0.005	370	370	0
Primary Care Sub-Tot.	1,922	1,984	2,880	2,157	2,229	3,225	3,225	3,225	0
Emergency Care									
Emergency/Urgent	256	181		288	204		288	288	0
ER/Non-urgent	20	121	202	22	136	404	136	136	0
Emerg. Care Sub-Tot.	276	302	363	310	339	404	404	404	0
Specialty Care									
Orthopedics	28	153		32	171		171	171	0
Ophthalmology	31	115		34	129		130	130	0
Dermatology	1	120		1	135		135	135	0
General Surgery	69 24	118 70		77 27	133 79		133 79	133 79	0 0
Otolaryngology	24 9	70 37		10	79 41		79 41	79 41	0
Cardiology Urology	19	42		22	47		47	47	0
Neurology	10	32		11	36		36	36	0
Other Specialties	10	259		0	291		291	291	0
Nephrology	2	Unknown		2	Unknown		2	2	0
Allergy	0	Unknown		0	Unknown		0	0	0
Pulmonology	0	Unknown		0	Unknown		0	0	0
Gerontology	0	Unknown		0	Unknown		0	0	0
Gastroenterology	0	Unknown		0	Unknown		0	0	0
Rheumatology	0	Unknown		0	Unknown		0	0	0
Oncology	0	Unknown		0	Unknown		0	0	0
Pediatric-Genetics	0	Unknown		0	Unknown		0	0	0
Traditional Healing	0	Unknown		0	Unknown		0	0	0
Specialty Care Sub-Tot.	194	946	144	218	1,062	162	1,066	1,066	0
Total Provider Visits By	2,392	3,232	3,387	2,685	3,631	3,791	4,695	4,695	0
PSA Residents	_,	-,	-,	_,	-,	-,	.,	1,000	·
Provider Visits	Unme	-uun	Over Utilization	on if (+)					
i revider viens	need if (-)		()					
Total Provider Patient	2.00	4.02	4.00	The rate is	established by	dividing the	Total Provide	r Visits from th	ne PSA by
Utilization Rate	2.99	4.03	4.23	the User P	opulation.				
Other Ambulatory Care									
Services									
Dental Service Minutes	0	71,893	76,095	0	80,636	85,405	85,405	85,405	0
Optometry Visits	166	Unknown	262	187	Unknown	294	299	299	0
Podiatry Visits	80	170		90	190		196	196	0
Dialysis Patients Audiology Visits	0 111	Unknown 130	92	0 125	Unknown 146	107	0 146	0 146	0 0
		130	92	120	140	107	140	140	U
Outpatient Behavioral Health		l la l···	407		I Indian	450	450	450	
Mental Health Visits	4	Unknown	137	4	Unknown	152	152	152	0
Psychiatry Social Sorvices Visits	37 0	83 Unknown		42	93 Unknown		93	93	0 0
Social Services Visits Alcohol & Substance Abuse	0	Unknown		0 0	Unknown Unknown		0	0	0
BH Visits Totals	41	83	137	46	93	152	245	245	0
Dii Visits Iotals	-71	55	101	-10	00	102	270	270	3

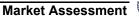




Market Assessment

Historical vs. Market Potential - In accordance to the population, compares the Historical Workload to the US State or National Average (USNA) and IHS Health System Planning (HSP) Software. USNA are taken from a number of sources see Patient Utilization Table for sources.

Year		2001			2015		2015 PI	anning Assı	ımption
HSP User Pop PSA		801			899			rith Diabetes In	
Discipline	3 Year History	USNA	HSP	3 Year History	USNA	HSP	Total	Direct Care	Contract Care
Inpatient Care	Prov	vider Visits O	nly	Pro	vider Visits On	ily	Pi	rovider Visits Or	nly
Labor & Delivery Births	13	16	18	14	18	21	21	17	4
Obstetrics Patient Days	29	33	39	33	37	44	44	36	8
Neonatology Patient Days	19	41		22	46		46	28	18
Pediatric Patient Days	16	21	35	18	23	36	36	23	13
Adult Medical Patient Days									
Cardiology	21	26		23	30		32	24	8
Endocrinology	6	4		7	5		8	8	0
Gastroenterology	40	16		45	17		45	45	0
General Medicine	14	19		16	22		22	20	2
Hematology	1	3		1	3		3	1	1
Nephrology	6	5		7	5		7	6	1
Neurology	2	11		3	12		13	11	2
Oncology	10	7		12	7		12	4	8
Pulmonary	29	26		32	29		32	27	5
Rheumatology	0	1		0	1		1	1	0
Unknown	0	1	00	0	2	00	2	2	0
Medical Patient Day Total	130	118	82	146	133	96	176	149	27
Adult Surgical Patient Days	0	0		0	0		0	0	0
Dentistry Dermatology	11	1		12	1		12	12	0
General Surgery	22	33		25	37		37	25	12
Gynecology	3	7		3	8		8	7	1
Neurosurgery	0	8		0	9		9	3	6
Ophthalmology	0	0		0	0		0	0	0
Orthopedics	38	21		42	24		42	36	7
Otolaryngology	4	7		4	8		8	1	7
Thoracic Surgery	0	13		0	14		14	1	14
Urology	1	5		1	5		5	2	3
Vascular Surgery	13	8		14	9		14	6	8
Surgical Patient Day Total	91	104	56	102	116	61	151	93	58
Psychiatry Patient Days	8	18	10	9	20	12	20	5	15
Medical Detox Patient Days	9	3		10	3		10	7	3
Sub Acute/Transitional Care	0	71		0	79		79	79	0
Inpatient Care Totals	303	408	222	340	458	249	563	420	143
Inpatient Patient Days	Unmet need if (-)	-105	Over Utilizati	on if (+)					
Substance Abuse Non-Acute	Care								
Adult Residential Treatment	0	142		0	159		159	159	0
Adol. Residential Treatment	0	35		0	38		38	38	0
SA Transitional Care	0	6		0	6		6	6	0
Substance Abuse Total	0	182	0	0	203	0	203	203	0
Elder Care									
Skilled Nursing Patients	0	2		0	2		2	2	0
Assisted Living Patients	0	2		0	2		2	2	0
Hospice Patients	0	0		0	0		0	0	0
Nursing Home Total	0	4	0	0	4	0	4	4	0



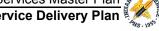


Market Assessment

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Year		2001			2015		2015 Pla	anning Assı	umption
HSP User Pop PSA		801			899		Workload wi	ith Diabetes In	npact
Discipline	3 Year History	USNA	HSP	3 Year History	USNA	HSP	Total	Direct Care	Contract Care
	Pro	ovider Visits On	ly	Pro	ovider Visits On	ly	Pr	ovider Visits Or	nly
Ancillary Services									
Laboratory Services				1					
Clinical Lab Billable Tests		3,417	2,607		3,837	2,919	3,837	3,474	222
Microbiology Billable Tests		475	619		534	693	693	401	267
Blood Bank Billable Tests		87	50		97	56	97	92	2
Anatomical Pathology		7	17		8	19	19	0	18
Lab Billable Tests	0	3,985	3,293	0	4,475	3,687	4,475	3,966	509
Pharmacy Scripts	0	8,080		0	9,077		9,077	9,077	0
Acute Dialysis Procedures	0	3		0	3		3	3	0
Radiographic Exams	2	286	303	3	321	339	339	339	0
Ultrasound Exams	0	56	42	0	63	47	63	63	0
Mammography Exams	0	119	125	0	133	141	141	141	0
Fluoroscopy Exams	0	14	21	0	16	23	23	23	0
CT Exams	0	22	7	0	25	8	25	25	0
MRI Exams	0	15		0	16		16	16	0
Nuclear Medicine Exams	0	Unknown		0	Unknown		0	0	0
Rad. Oncology Treatments	0	Unknown		0	Unknown		0	0	0
Chemotherapy Treatments	0	Unknown		0	Unknown		0	0	0
Rehabilitation Services									
Physical Therapy Visits	280	Unknown		314	Unknown		314	314	0
Occupational Therapy Visits	0	Unknown		0	Unknown		0	0	0
Speech Therapy Visits	0	Unknown		0	Unknown		0	0	0
Rehab Total Visits	280	-	385	314	-	432	432	432	0
Respiratory Therapy	0	Unknown	3,450	0	Unknown	3,855	3,855	3,855	0
Workload Minutes	0		,	•		, i			
Cardiac Catherization Cases	0	3		0	6		6	6	0
Home Health Care Patients	0	6		0	7		7	7	0
Minor Procedure Cases		4.4			40		40	40	0
Endoscopy		14			16		16	16	0
Outpatient Surgery Cases Cardiovascular	0	1		0	1		4	1	0
Digestive	0	1 14		0	1 16		1 16	1 16	0 0
Endocrine	0	0		0	0		0	0	
Endocrine	3	6		0 3	6		6	6	0 0
Gynecology	3	5		3	5		5	5	0
Hemic and Lymphatic	0	0		0	0		0	0	0
Integument	1	5		1	6		6	6	0
Musculoskeletal	6	9		6	10		10	10	0
Nervous	0	2		0	3		3	3	0
Ocular	1	6		1	7		7	7	0
Respiratory	0	1		0	1		1	1	0
Urogenital	2	4		3	4		4	4	0
OP Surgical Case Total	17	53	21	19	59	24	59	59	0
Inpatient Surgery Cases	22	22	19	25	24	20	25	15	10
Surgical Case Total	39	74	40	44	83	44	84	74	10
EMS Responses	0	105		0	118		118	118	0
FINIO IZESPONSES	U	100		U	110		110	110	J

THE INNOVA GROUP



Delivery Plan

		Projected Need				Deliv	ery Options	S	
	Planned Direct	Key Characteristics	# Req'd		PSA			s due to	
Discipline	Care	(KC)	in 2015	On Site	On Site VP	CHS*	Srv Unit	Region	Remarks
Primary Care (Provider Visits)	Migration %								
Primary Care Clinic examin health professionals and a assesses, provides, and ev illnesses, maintenance car	dmissions to valuates the	inpatient services while care of patients with he	e retaining p ealthcare pro	rimary respons blems includin	sibility for care	of these pa	tients, as app	ropriate. Prim	nary Care Clinic
Family Practice	2,001	Providers	0.4	2,391					
Internal Medicine	390	Providers	0.1						
Pediatric	464	Providers	0.1		464	-			Brownin
Ob/Gyn	370	Providers	0.1		370				Brownin
Primary Care Total	3,225	Providers	0.8	2,391	834	0	0		
Emergency Care	Migration %								
The Emergency Medical C nature to patients who pres services and professional t Emergency/Urgent	sent themsel training of as 288	ves to the service. It re signed personnel; supp Patient Spaces	efers patients ports mass c 0.1	to specialty o	linics and adn	nits patients	as needed; pi		
ER/Non-urgent	136	Providers	0.0						
Emergency Care Total	404	D 11 1 0							
	404	Patient Spaces	0.2				404		CHS @ SI
Specialty Care Specialty Care examines, of team. The service is typical	diagnoses, a	nd treats diseases and	injuries requ			-	and procedure	es beyond the	
Specialty Care Specialty Care examines, team. The service is typical Orthopedics	diagnoses, a ally provided 171	nd treats diseases and by visiting providers w Providers	injuries requ ho have esta 0.1			-	and procedure al patterns. 171	es beyond the	-
Specialty Care Specialty Care examines, team. The service is typical Orthopedics Ophthalmology	diagnoses, a ally provided 171 130	nd treats diseases and by visiting providers w Providers Providers	l injuries requ ho have esta 0.1 0.0			-	and procedure al patterns.	es beyond the	Primary Care
Specialty Care Specialty Care examines, team. The service is typical Orthopedics Ophthalmology Dermatology	diagnoses, a ally provided 171 130 135	nd treats diseases and by visiting providers wi Providers Providers Providers	injuries requires to have estate 0.1 0.0 0.0			-	and procedure al patterns. 171 130	es beyond the	Primary Care
Specialty Care Specialty Care examines, team. The service is typical Orthopedics Ophthalmology Dermatology General Surgery	diagnoses, a ally provided 171 130 135 133	nd treats diseases and by visiting providers with Providers Providers Providers Providers	l injuries requires not to have esta 0.1 0.0 0.0 0.0			-	and procedure al patterns. 171 130	es beyond the	Primary Care
Specialty Care Specialty Care examines, team. The service is typical Orthopedics Ophthalmology Dermatology General Surgery Otolaryngology	diagnoses, a ally provided 171 130 135 133 79	nd treats diseases and by visiting providers with Providers Providers Providers Providers Providers	0.1 0.0 0.0 0.0 0.0			-	and procedure al patterns. 171 130 133 79	es beyond the	Primary Care
Specialty Care Specialty Care examines, team. The service is typical Orthopedics Ophthalmology Dermatology General Surgery Otolaryngology Cardiology	diagnoses, a ally provided 171 130 135 133 79 41	nd treats diseases and by visiting providers with Providers Providers Providers Providers Providers Providers	0.1 0.0 0.0 0.0 0.0 0.0			-	and procedure al patterns. 171 130 133 79 41	es beyond the	Primary Care Telemedicine
Specialty Care Specialty Care examines, team. The service is typical Orthopedics Ophthalmology Dermatology General Surgery Otolaryngology Cardiology Urology	diagnoses, a ally provided 171 130 135 133 79 41 47	nd treats diseases and by visiting providers wi Providers Providers Providers Providers Providers Providers Providers Providers Providers	0.1 0.0 0.0 0.0 0.0 0.0 0.0			-	and procedure al patterns. 171 130 133 79 41 47	es beyond the	Primary Care Telemedicing
Specialty Care Specialty Care examines, of team. The service is typical orthopedics Orthopedics Ophthalmology Dermatology General Surgery Otolaryngology Cardiology Urology Neurology	diagnoses, a ally provided 171 130 135 133 79 41 47	nd treats diseases and by visiting providers with providers	0.1 0.0 0.0 0.0 0.0 0.0 0.0 0.0			-	and procedure al patterns. 171 130 133 79 41 47 36	es beyond the	Primary Care Telemedicin CHS @ SI CHS @ SI
Specialty Care Specialty Care examines, team. The service is typical Orthopedics Ophthalmology Dermatology General Surgery Otolaryngology Cardiology Urology	diagnoses, a ally provided 171 130 135 133 79 41 47 36 291	nd treats diseases and by visiting providers wi Providers Providers Providers Providers Providers Providers Providers Providers Providers	0.1 0.0 0.0 0.0 0.0 0.0 0.0			-	and procedure al patterns. 171 130 133 79 41 47	es beyond the	Primary Care Telemedicin CHS @ SI CHS @ SI
Specialty Care Specialty Care examines, of team. The service is typical orthopedics Orthopedics Ophthalmology Dermatology General Surgery Otolaryngology Cardiology Urology Neurology Other Subspecialties Nephrology	diagnoses, a ally provided 171 130 135 133 79 41 47 36 291	nd treats diseases and by visiting providers with providers	0.1 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0			-	and procedure al patterns. 171 130 133 79 41 47 36 291	es beyond the	Primary Care Telemedicin CHS @ SI CHS @ SI
Specialty Care Specialty Care examines, of team. The service is typical orthopedics Orthopedics Ophthalmology Dermatology General Surgery Otolaryngology Cardiology Urology Neurology Other Subspecialties Nephrology Allergy Pulmonology	diagnoses, a ally provided 171 130 135 133 79 41 47 36 291 2 Unknown	nd treats diseases and by visiting providers with providers	0.1 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0			-	and procedure al patterns. 171 130 133 79 41 47 36 291	es beyond the	Primary Care Telemedicin CHS @ SI CHS @ SI
Specialty Care Specialty Care examines, of team. The service is typical orthopedics Orthopedics Ophthalmology Dermatology General Surgery Otolaryngology Cardiology Urology Neurology Other Subspecialties Nephrology Allergy Pulmonology Gerontology	diagnoses, a ally provided 171 130 135 133 79 41 47 36 291 2 Unknown Unknown	providers	0.1 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0			-	and procedure al patterns. 171 130 133 79 41 47 36 291	es beyond the	Primary Care Telemedicin CHS @ SI CHS @ SI
Specialty Care Specialty Care examines, of team. The service is typical orthopedics Orthopedics Ophthalmology Dermatology General Surgery Otolaryngology Cardiology Urology Neurology Other Subspecialties Nephrology Allergy Pulmonology Gerontology Gastroenterology	diagnoses, a ally provided 171 130 135 133 79 41 47 36 291 2 Unknown Unknown	providers	0.1 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0			-	and procedure al patterns. 171 130 133 79 41 47 36 291	es beyond the	Primary Care Telemedicing CHS @ SU CHS @ SU
Specialty Care Specialty Care examines, of team. The service is typical orthopedics Orthopedics Ophthalmology Dermatology General Surgery Otolaryngology Cardiology Urology Neurology Other Subspecialties Nephrology Allergy Pulmonology Gerontology Gastroenterology Rheumatology	diagnoses, a ally provided 171 130 135 133 79 41 47 36 291 2 Unknown Unknown	providers	0.1 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0			-	and procedure al patterns. 171 130 133 79 41 47 36 291	es beyond the	Primary Care Telemedicing CHS @ SU CHS @ SU
Specialty Care Specialty Care examines, of team. The service is typical orthopedics Orthopedics Ophthalmology Dermatology General Surgery Otolaryngology Cardiology Urology Neurology Other Subspecialties Nephrology Allergy Pulmonology Gerontology Gastroenterology Rheumatology Oncology	diagnoses, a. ally provided 171 130 135 133 79 41 47 36 291 2 Unknown Unknown Unknown Unknown Unknown Unknown	nd treats diseases and by visiting providers with providers	0.1 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0			-	and procedure al patterns. 171 130 133 79 41 47 36 291	es beyond the	Primary Care Telemedicing CHS @ SU CHS @ SU
Specialty Care Specialty Care examines, of team. The service is typical orthopedics Orthopedics Ophthalmology Dermatology General Surgery Otolaryngology Cardiology Urology Neurology Other Subspecialties Nephrology Allergy Pulmonology Gerontology Gastroenterology Rheumatology Oncology Pediatric-Genetics	diagnoses, a ally provided 171 130 135 133 79 41 47 36 291 2 Unknown Unknown Unknown Unknown	nd treats diseases and by visiting providers with providers	0.1 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0	blished clinic		-	and procedure al patterns. 171 130 133 79 41 47 36 291	es beyond the	Primary Care Telemedicing CHS @ SU CHS @ SU
Specialty Care Specialty Care examines, of team. The service is typical orthopedics Orthopedics Ophthalmology Dermatology General Surgery Otolaryngology Cardiology Urology Neurology Other Subspecialties Nephrology Allergy Pulmonology Gerontology Gastroenterology Rheumatology Oncology	diagnoses, a. ally provided 171 130 135 133 79 41 47 36 291 2 Unknown Unknown Unknown Unknown Unknown Unknown	nd treats diseases and by visiting providers with providers	0.1 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0			-	and procedure al patterns. 171 130 133 79 41 47 36 291	es beyond the	Primary Care Telemedicin CHS @ SI CHS @ SI
Specialty Care Specialty Care examines, of team. The service is typical orthopedics Orthopedics Ophthalmology Dermatology General Surgery Otolaryngology Cardiology Urology Neurology Other Subspecialties Nephrology Allergy Pulmonology Gerontology Gastroenterology Rheumatology Oncology Pediatric-Genetics Traditional Healing Specialty Care Sub-	diagnoses, a ally provided 171 130 135 133 79 41 47 36 291 2 Unknown Unknown Unknown Unknown Unknown	nd treats diseases and by visiting providers with providers	0.1 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0	blished clinic	hours for cons	istent referra	and procedure al patterns. 171 130 133 79 41 47 36 291 2	es beyond the	Primary Care Telemedicine CHS @ SU CHS @ SU
Specialty Care Specialty Care examines, of team. The service is typical Orthopedics Ophthalmology Dermatology General Surgery Otolaryngology Cardiology Urology Neurology Other Subspecialties Nephrology Allergy Pulmonology Gerontology Gastroenterology Rheumatology Oncology Pediatric-Genetics Traditional Healing Specialty Care Sub-Total Other Ambulatory	diagnoses, a ally provided 171 130 135 133 79 41 47 36 291 2 Unknown Unknown Unknown Unknown Unknown	nd treats diseases and by visiting providers with providers	0.1 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0	blished clinic	hours for cons	istent referra	and procedure al patterns. 171 130 133 79 41 47 36 291 2	es beyond the	Primary Care Telemedicine CHS @ SU CHS @ SU
Specialty Care Specialty Care examines, of team. The service is typical Orthopedics Ophthalmology Dermatology General Surgery Otolaryngology Cardiology Urology Neurology Other Subspecialties Nephrology Allergy Pulmonology Gerontology Gastroenterology Rheumatology Oncology Pediatric-Genetics Traditional Healing Specialty Care Sub- Total Other Ambulatory Care Services	diagnoses, a. ally provided 171 130 135 133 79 41 47 36 291 2 Unknown	nd treats diseases and by visiting providers with providers Provid	0.1 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0	0 0 85,405	hours for cons	o O	and procedure al patterns. 171 130 133 79 41 47 36 291 2		CHS @ SUCHS @

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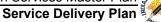
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vision; and refers patients to physicians for diagnosis and treatment of suspected disease.

Podiatrists

Podiatry Visits



Delivery Plan

Establishes Projected workload and key characteristics per product line, while recommending a delivery option.

		Projected Need			Delive	ry Option	S		
	Planned Direct	Key Characteristics	# Req'd		PSA			ls due to shold	
Discipline	Care	(KC)	in 2015	On Site	On Site VP	CHS*	Srv Unit	Region	Remarks

Podiatry examines, diagnoses, and treats patients with disorders, diseases, and injuries to the foot or adjunctive tissue; provides follow-up care for selected postoperative ambulatory patients; provides a comprehensive plan of care for patients, including monitoring and maintaining their state of health, counseling and guidance, health eduation, rehabilitation, and prevention of disease; and provides clinical and consultation services, medical care evaluation, professional training of assigned personnel, preparation and submission of reports, and maintenance of medical records.

Dialysis Patients 0 Dialysis Stations 0.0

Dialysis provides the purification of the patient's blood through use of an artificial kidney machine or similar device. Specially trained personnel operate, maintain, and monitor the hemodialysis equipment and other specialized support equipment for patients who are undergoing hemodialysis treatment in the unit.

0.1 Audiologists

The Audiology Clinic provides comprehensive audiologic support for patients for the determination of etiology, pathology, and magnitude of hearing loss and potential for remediation and rehabilitation; assists in the evaluation of auditory and vestibular systems. Specific services include pure tone threshold audiometry; basic and advanced clinical testing; pediatric evaluations; neonatal hearing testing as part of the early hearing loss identification program; hearing aid evaluation, fittings, and repairs; ear mold fittings; vestibular evaluations, dispensing of hearing protection devices (fitting, education, and motivation); determination of proper referral and disposition.

Behavioral Health

Behavioral Health provides psychiatric, psychological, psychosocial, substance abuse, and socioeconomic evaluation and consultation; individual and group services, patient care, information, referral, and follow-up services to facilitate medical diagnosis, care, treatment; and proper disposition of patients (inpatient and outpatient) referred to the Social Work Clinic, which includes self-referred patients and those seen automatically on the basis of diagnosis (for example, suspected child abuse or attempted suicide). It provides a comprehensive plan of service to patients and their families including counseling and guidance, therapy, information and referral, and discharge planning; provides clinical and consultative services to patients and families, social service delivery evaluation; professional training of assigned and contractually affiliated personnel; prepares and submits reports; maintains medical and social service records.

Mental Health Visits	152	Counselors	1.1	1.1		
Psychiatry Provider	93	Providers	0.1		0.1	Central Tertiary
Social Service Visits	0	Counselors	0.5	0.5		
Alcohol & Substance Abuse Visits	0	Counselors	0.6	0.6		Ask Tribal Hlth Dir
Behavioral Health Totals	245	Counselors	2.2	2.2		

Inpatient Care				
Labor & Delivery	17	LDRs	0.3	17
Obstetrics Patient Days	36	# of Beds	0.6	36

Obstetrics provides for specialized care, treatment, and consultative evaluation to eligible inpatients; provides antepartum, delivery, and postpartum care to maternity patients; and has responsibility for the operation and maintenance of the labor and delivery suite. The labor and delivery suite provides labor and delivery care by specially trained personnel to eligible patients, including prenatal care during labor, assistance during delivery, post-natal care, and minor gynecological surgery, if it is performed in the suite. Additional activities may include preparing sterile set-ups for deliveries; preparing patients for transportation to the delivery suite and the post-anesthesia.

Neonatology Patient 28 # of Bassinets 0.5 28 CHS @ SU Davs

The Newborn Nursery provides specialized inpatient care, treatment, and consultative evaluation of newborn infants; coordinates healthcare delivery relative to the examination, diagnosis, treatment, and proper disposition of the newborn, including those born prematurely; and provides for, or otherwise ensures, appropriate diagnostic evaluation and care of all inpatient in the neonatal age group; prepares medical records; and submits required reports.

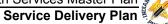
Pediatric Patient Days # of Beds

Pediatric Care provides specialized inpatient care, treatment, and consultative evaluation of infants, children, and adolescents; maintains close liaison with the other professional services; coordinates healthcare delivery relative to the examination, diagnosis, treatment, and proper disposition of eligible patients; prepares medical records; and submits required reports.

Adult Medical Acute Care

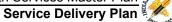
Medical Care provides inpatient care and consultative evaluation in the medical specialties and subspecialties described in this section; coordinates healthcare delivery relative to the examination, diagnosis, treatment and proper disposition of eligible patients, appropriate to the specialty or subspecialty; prepares medical records; and submits required reports. The organization of the medical care function will vary according to patient load, staffing, and facilities. When subspecialty services are established, they shall provide the related specialized techniques and practices using all the available modern diagnostic procedures, studies, and therapies.

Cardiology	24	# of Beds 0.2	24	CHS @ SU
Endocrinology	8	# of Beds 0.1	8	CHS @ SU



Delivery Plan

Discipline Gastroenterology	Planned Direct	Projected Need							
		Key Characteristics	# Req'd		PSA		Referrals Thres		
Gastroenterology	Care	(KC)	in 2015	On Site	On Site VP	CHS*	Srv Unit	Region	Remarks
Cubil ochici ology	45	# of Beds	0.4				45		CHS @ SI
General Medicine	20	# of Beds	0.4	-			20		CHS @ SI
Hematology	1	# of Beds	0.0				1		CHS @ SI
Nephrology	6	# of Beds	0.1				6		CHS @ SI
Neurology	11	# of Beds	0.1				11		CHS @ SI
Oncology	4	# of Beds	0.0				4		CHS @ SI
Pulmonary	27	# of Beds	0.0				27		CHS @ SI
Rheumatology	1	# of Beds	0.0				1		CHS @ SI
Unknown	2	# of Beds	0.0				2		CHS @ SI
		# UI Deus	0.0						CH3 @ 3
edical Patient Day	149		1.4	0		0	149	0	
dult Surgical Acute Ca	re								
ealthcare delivery relative repares medical records; a /hen subspecialty services rocedures, studies, and the	and submits s are establi erapies.	required reports. The shed, they shall provide	organization the related	n of the surgi	cal care function	varies acco	ording to patien	nt load, staffin	ng, and facilities. In diagnostic
Dentistry	0	# of Beds	0.0				0		CHS @ S
Dermatology	12	# of Beds	0.1				12		CHS @ S
General Surgery	25	# of Beds	0.3				25		CHS @ S
Gynecology	7	# of Beds	0.1				7		CHS @ S
Neurosurgery	3	# of Beds	0.0				3		CHS @ S
Ophthalmology	0	# of Beds	0.0				0		CHS @ S
Orthopedics	36	# of Beds	0.4				36		CHS @ S
Otolaryngology	1	# of Beds	0.0				1		CHS @ S
Thoracic Surgery	1	# of Beds	0.0				1		CHS @ S
Urology	2	# of Beds	0.0				2		CHS @ S
Vascular Surgery	6	# of Beds	0.1				6		CHS @ S
urgical Patient Day otal	93	# of Beds	1.0	0		0	93	0	
ntensive Care Unit	45	# of beds	0.2				45		CHS @ S
tensive Care Units (ICUs) reatening conditions. The	y are staffed	d with specially trained	personnel a				ner specialized		ipment for treatin
sychiatry Patient	5	# of Beds	0.0				5		CHS @ S
Psychiatric Care provides s liagnosis, treatment, and pu sychiatric disorders when in rovides short-term treatme ecords and correspondent Medical Detox Patient	roper dispos required to p ent to patien	sition of patients with ps orevent injury to thems ts psychologically or ph	sychotic, net elves or to o sysically dep	urotic, or othe others; estable pendent upon	er mental disorde shes therapeutio alcohol or drugs	ers; maintai regimens; r; maintains	ns protective of conducts indiv custody of se	ustody of pat vidual or grou	ients with p therapy session
Substance Abuse Care pro- liagnosis, treatment, and pu when required to prevent in ensitive or medically privile	roper dispos jury to them	sition of patients psycho selves or to others; est	ologically or ablishes the	physically de erapeutic regi	pendent upon a mens; conducts	cohol or dr individual o	ugs; maintains or group therap	protective cu y sessions; n	ustody of patients naintains custody
Sub Acute / Fransitional Care	79	# of Beds	0.3					79	
ransitional Care provides of cute care, provides specifi		· ·				eir discharg	ge from acute	care. Staffing	g, while less than
npatient Care Totals	465	# of Beds	4	0		0	379	86	
Substance Abuse Ion-Acute Care	te Care the	a treatment of substance	a ahusa dis	orders in an	age and securify	snacific so	ttina		
upsiance Aduse Non-Acu	e Care - the	e treatment of substanc	e abuse dis	oraers in an	age and security	specific se	uing.		



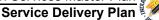
Delivery Plan

Establishes Projected workload and key characteristics per product line, while recommending a delivery option.

		Projected Need				Deliv	ery Options	\$	
	Planned Direct	Key Characteristics	# Req'd		PSA			s due to shold	
Discipline	Care	(KC)	in 2015	On Site	On Site VP	CHS*	Srv Unit	Region	Remarks
Adolescent Residential									
Treatment	38	# of Beds	0.1					38	
Substance Abuse									
Transitional Care	6	# of Beds	1.1				6		
Substance Abuse Non-	000		4.0	0		^	0	407	
Acute Care Totals	203		1.8	0		0	6	197	
Elder Care									
Elderly Care Program provi	ides physica	al, psychological, social,	and spiritu	al care for he	althy and dying	seniors in a	n environmen	t outside of a	hospital.
Nursing Home	2	# of Beds	2.0				2		
Assisted Living /	2	# of Beds	2.0				2		
Hospice	0	# of Beds	0.0				0		
Elder Care Totals	4		4.0	0		0	4	0	
Ancillary Services									
Laboratory Services									
	ioo may inal			_	•			_	
systems. Additional activiti samples for testing. The Cl Clinical Lab	inical Lab in 3,474	ude, but are not limited cludes Chemistry, Urina Tech Staff @ Peak	to, transpor alysis, Hem 0.4	tation of spec	imens from the	nursing floo	rs and surgica gulation.	_	
systems. Additional activiti samples for testing. The Cl Clinical Lab Microbiology	inical Lab in 3,474 401	ude, but are not limited cludes Chemistry, Urini Tech Staff @ Peak Tech Staff @ Peak	to, transpor alysis, Hem 0.4 0.0	tation of spec atology, Sero	imens from the	nursing floo	rs and surgica gulation. 401	_	
systems. Additional activiti samples for testing. The Cl Clinical Lab Microbiology Blood Bank	3,474 401 92	ude, but are not limited cludes Chemistry, Urin Tech Staff @ Peak Tech Staff @ Peak Tech Staff @ Peak	to, transpor alysis, Hem 0.4 0.0 0.0	tation of spec atology, Sero	imens from the	nursing floo	rs and surgica gulation.	_	
systems. Additional activiti samples for testing. The Cl Clinical Lab Microbiology Blood Bank Anatomical Pathology	3,474 401 92 0	ude, but are not limited cludes Chemistry, Urind Tech Staff @ Peak Tech Staff @ Peak Tech Staff @ Peak Tech Staff @ Peak	to, transpor alysis, Hem 0.4 0.0 0.0 0.0	atology, Sero	imens from the logy, Immunolog	nursing floo gy and Coag 0	rs and surgical gulation. 401 92	al suites and _l	oreparation of
systems. Additional activiti samples for testing. The Clinical Lab Clinical Lab Microbiology Blood Bank Anatomical Pathology Anatomical Pathology cond	inical Lab in 3,474 401 92 0 ducts the his	ude, but are not limited cludes Chemistry, Urind Tech Staff @ Peak Tech Staff	to, transportallysis, Hemology 0.4 0.0 0.0 0.0 0.0 athology laboratory	atology, Sero 3,474	imens from the logy, Immunology, Immunology	nursing floo gy and Coag 0 minations, a	rs and surgice gulation. 401 92 and evaluatior	al suites and _l	oreparation of
systems. Additional activiti samples for testing. The Clinical Lab Clinical Lab Microbiology Blood Bank Anatomical Pathology Anatomical Pathology cond	3,474 401 92 0 ducts the his	ude, but are not limited cludes Chemistry, Urind Tech Staff @ Peak Tech Staff	to, transportallysis, Hemology 0.4 0.0 0.0 0.0 0.0 athology laboratory	atology, Sero 3,474	imens from the logy, Immunology, Immunology	nursing floo gy and Coag 0 minations, a	rs and surgice gulation. 401 92 and evaluatior	al suites and _l	oreparation of
systems. Additional activiti samples for testing. The Clinical Lab Clinical Lab Microbiology Blood Bank Anatomical Pathology Anatomical Pathology cond routine procedures; provide Lab Totals	3,474 401 92 0 ducts the his	ude, but are not limited cludes Chemistry, Urind Tech Staff @ Peak	to, transpor alysis, Hem 0.4 0.0 0.0 0.0 0.0 thology laborus post-m	atology, Sero 3,474	imens from the logy, Immunology, Immunology	nursing floo gy and Coag 0 minations, a	rs and surgice gulation. 401 92 and evaluatior	al suites and _l	oreparation of
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systems. Additional activiti samples for testing. The Clinical Lab Microbiology Blood Bank Anatomical Pathology Anatomical Pathology condroutine procedures; provides Lab Totals Pharmacy Acute Dialysis provides pur water and toxins, while the perform these same function	inical Lab in 3,474 401 92 0 fucts the his es referrals a 3,966 9,077 3 rification of t patient is he	ude, but are not limited cludes Chemistry, Urinciech Staff @ Peakeech Staff @ Peakeech Staff @ Peakeech Staff @ Peaketopathology and cytopathology and consultations; performancists Rooms The patient's blood using oppitalized. Specialty training consultation of the position of the patient's blood using oppitalized. Specialty training consultation of the patient's blood using oppitalized. Specialty training consultation of the patient's blood using oppitalized. Specialty training consultation of the patient's blood using oppitalized. Specialty training consultation of the patient's blood using oppitalized. Specialty training consultation of the patient's blood using oppitalized.	to, transpor alysis, Hem 0.4 0.0 0.0 0.0 0.0 thology laborus post-m 0.4 0.0 q the patient	tation of speciatology, Sero 3,474 pratories; directorem examination 9,077	ects studies, exa nations; and ope	Onminations, a prates the m	rs and surgices gulation. 401 92 and evaluation orgue. 3 he abdomen,	al suites and plants including d	iagnostic and
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systems. Additional activiti samples for testing. The Clinical Lab Microbiology Blood Bank Anatomical Pathology concroutine procedures; provides Lab Totals Pharmacy Acute Dialysis Acute Dialysis Perform these same function Diagnostic Imaging Diagnostic Radiology providinterpreting, storing, and re Radiographic Ultrasound Mammography	inical Lab in 3,474 401 92 0 ducts the his es referrals a 3,966 9,077 3 rification of t patient is he cons in the ho des diagnos trieving radi 339 63 141	ude, but are not limited cludes Chemistry, Urina ech Staff @ Peak ech Staff @ Peak ech Staff @ Peak ech Staff @ Peak topathology and cytopa and consultations; performations and consultations are partially as the patient's blood using compatible and consultations are settings. etic radiologic services to tographs and fluorographs and fluor	to, transportally sis, Hemilians (1.4) 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.	tation of speciatology, Sero 3,474 pratories; directorem examination of the examination	ects studies, exanations; and open	Omminations, a crates the mily member	rs and surgices gulation. 401 92 and evaluation orgue. 3 the abdomen, ors through an orgunity with physical gulating gula	as the filter to intense train	ingnostic and premove excessing program how g, examining,
systems. Additional activities amples for testing. The Clinical Lab Microbiology Blood Bank Anatomical Pathology Anatomical Pathology Control Pathology Cont	inical Lab in 3,474 401 92 0 ducts the his as referrals a 3,966 9,077 3 rification of t patient is he cons in the ho des diagnos trieving radi 339 63 141 23	ude, but are not limited cludes Chemistry, Urina ech Staff @ Peak ech Staff @ Peak ech Staff @ Peak ech Staff @ Peak topathology and cytopa and consultations; performations and consultations are partially as the patient's blood using compatible and consultations are settings. The patient's blood using compatible and fluorographs and fluor	to, transportalysis, Hemiology Indianal	tation of speciatology, Sero 3,474 pratories; directorem examination of the examination	ects studies, exanations; and open	Omminations, a crates the mily member	rs and surgices gulation. 401 92 and evaluation orgue. 3 the abdomen, ors through an evaluating with photos and sulting with sulting with photos and sulting with sulting	as the filter to intense train	ingnostic and premove excessing program how g, examining,
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systems. Additional activitisamples for testing. The Clinical Lab Microbiology Blood Bank Anatomical Pathology Anatomical Pathology Concroutine procedures; provides Lab Totals Pharmacy Acute Dialysis provides pur water and toxins, while the perform these same function Diagnostic Imaging Diagnostic Radiology providinterpreting, storing, and resulting Radiographic Ultrasound Mammography Fluoroscopy CT MRI	inical Lab in 3,474 401 92 0 fucts the his as referrals a 3,966 9,077 3 rification of t patient is he ons in the ho des diagnos trieving radi 339 63 141 23 25	ude, but are not limited cludes Chemistry, Urina ech Staff @ Peak ech Staff @ Peak ech Staff @ Peak ech Staff @ Peak topathology and cytopa and consultations; performations and consultations are partially as the patient's blood using compatible and consultations are settings. The patient's blood using compatible and fluorographs and fluor	to, transportalysis, Hemiology Indianal	tation of speciatology, Sero 3,474 pratories; directorem examination of the examination	ects studies, exanations; and open	Omminations, a crates the mily member	rs and surgices gulation. 401 92 and evaluation orgue. 3 the abdomen, ors through an evaluating with photos and sulting with sulting with photos and sulting with sulting	as the filter to intense train	preparation of liagnostic and premove excessing program how g, examining, patients.
systems. Additional activiti samples for testing. The Cli Clinical Lab Microbiology Blood Bank Anatomical Pathology Anatomical Pathology concroutine procedures; provides Lab Totals Pharmacy Acute Dialysis Acute Dialysis provides pur water and toxins, while the perform these same function Diagnostic Imaging Diagnostic Radiology provide interpreting, storing, and re Radiographic Ultrasound Mammography Fluoroscopy CT	inical Lab in 3,474 401 92 0 fucts the his as referrals a 3,966 9,077 3 rification of t patient is he ons in the ho des diagnos trieving radi 339 63 141 23 25	ude, but are not limited cludes Chemistry, Urina ech Staff @ Peak ech Staff @ Peak ech Staff @ Peak ech Staff @ Peak topathology and cytopa and consultations; performations and consultations are performed by the patient's blood using compatible and consultations are settings. The patient's blood using compatible and fluorographs and fluor	to, transportally sis, Hemilians (1986) 1986 (1986) 19	tation of speciatology, Sero 3,474 pratories; directorem examination of the examination	ects studies, exanations; and open	Omminations, a crates the mily member	rs and surgices gulation. 401 92 and evaluation orgue. 3 the abdomen, ors through an outling with ph. 339 63 141 23 25	as the filter to intense train	preparation of liagnostic and premove excessing program how in

injectable or ingestible radioactive isotopes in conformance with licensure regulations. Functions and activities of the work center include, but are not limited to, performing clinical investigative studies, providing whole blood counting, evaluating patients suspected of being contaminated with gamma-emitting radio nuclides, consulting with patients and attending physicians, and maintaining radioactive waste disposal and storage of radioactive materials.

Rad. Oncology	0	Rooms	0.0	0
Chemotherapy	0	Patient Spaces	0.0	0



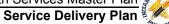
Delivery Plan

Establishes Projected workload and key characteristics per product line, while recommending a delivery option.

		Projected Need				Deliv	ery Options	\$	
	Planned Direct	Key Characteristics	# Req'd		PSA			s due to shold	
Discipline	Care	(KC)	in 2015	On Site	On Site VP	CHS*	Srv Unit	Region	Remarks
Rehabilitation Services									
Rehabilitation Services dev	elops, coord	dinates, and uses speci	ial knowledo	ge and skills i	n planning, orga	nizina. and	managing pro	grams for the	care of inpatients
and outpatients whose abili			-			-		-	•
consultation, counseling, te	-		-					•	
Occupational Therapy, and	Speech Th	erapy.							
Physical Therapy	314	Therapy FTE	0.2						
Occupational Therapy	0	Therapy FTE	0.0			Χ			
Speech Therapy	0	Therapy FTE	0.0			Χ			
Rehab Total	432	Therapy FTE	0.2				432		
Respiratory Therapy	3,855	Therapy FTE	0.0				3,855		
Respiratory Therapy provid						_			
other forms of rehabilitative			-		•			•	
analysis. The service also	tests and e	valuates the patient's al	bility to exch	nange oxygen	and other gases	s through m	neasurement o	of inhaled and	exhaled gases ar
analysis of blood.									0110 0 01
Cardiac Catherization	6	Rooms	0.0				6		CHS @ SI
The Cardiac Catheterization					•				
heart and circulatory system techniques; retrieving and a								ng carrieters a	ria otrier
Home Health Care	7	# FTE	0.5	alibrating, an	u maintaining sp	есіаі ециір	7		
				£ i - l		-!			- 11
Home Health Care is provide independence while minimized in the control of the co						ain, or resto	ore nealth or to	maximize the	e level of
	zing the end	ects of disability and lill	ess, iriciuuli	ng terminar iii	11633.				
Surgery			_	- 					
The Surgery product line in	cludes Ane	sthesiology, Pre & Post	Recovery,	and the provi	sion of invasive _l	procedures	requiring the	sterility of an (Operating Room o
Minor Procedure Room.									
Minor Procedure									
Endoscopy	16	Endoscopy Suites	0.0				16		
Outpatient Surgery Cas									
Cardiovascular	11	Outpatient ORs	0.0				1		CHS @ SI
Digestive	16	Outpatient ORs	0.0	<u> </u>			16		
Endocrine	0	Outpatient ORs	0.0				0		
ENT	6	Outpatient ORs	0.0				6		
Gynecology	5	Outpatient ORs	0.0				5		
Hemic and Lymphatic	0	Outpatient ORs	0.0				0		
Integument	6	Outpatient ORs	0.0	<u></u>			6		
Musculoskeletal	10	Outpatient ORs	0.0				10		
Nervous	3	Outpatient ORs	0.0	<u></u>			3		CHS @ SI
Ocular	7	Outpatient ORs	0.0				7		
Respiratory	1	Outpatient ORs	0.0				1		
Urogenital	4	Outpatient ORs	0.0				4		CHS @ SI
OP Surgical Case	59	Outpatient ORs	0.0	0	0	0	59		
Inpatient Surgery	15	Inpatient ORs	0.0	. <u> </u>			15		CHS @ SI
Surgical Case Total	74		0.0	0	0	0	90		
Administrativa									
Administrative									
Support									
Administration		# of FTE	2.5	2.5					ry Care Criteria
Administration organizes, a attached to the facility; dete						-		•	-
is responsible for the care,				o medicai sei	vices officers, sa	pport starr,	ana racintico,	impiements a	nected programs,
		# of FTE	1.0	1.0					SAC
Information Management D					to day operation	training n	naintenance a	nd develonme	
computerization hardware,		·	-			_		a acveropine	or trio
Health Information Man		# of FTE	4.2	4.2	., 3.0				SAC
Health Information Manage					analyzina ensur	ing ayailahi	lity and safel	reening of nati	
called charts) in order to fac			_	completing,	analyzing, ensur	g uvallabl	my, una saich	soping or pail	on records (also
Business Office	, oran	# of FTE	2.0	2.0					SAC
		# UII I E	/ 1/	U					

other health insurance; reviews all aspects of accounts receivable management, complies with third-party payer requirements; submits all claims to third-party

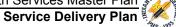
payers; follows up to ensure that collections are made; and documents and reports collection activities.



Delivery Plan

Establishes Projected workload and key characteristics per product line, while recommending a delivery option.

		Projected Need		Deliv	very Options	
	Planned Direct	Key Characteristics	# Req'd	PSA	Referrals due to Threshold	
Discipline	Care	(KC)	in 2015	On Site On Site VP CHS*	Srv Unit Region	Remarks
	_			1.2 t is not available at the facility. This is do and having an effective working relation		
Facility Support Services						
Clinical Engineering		# of FTE	0.5	0.5		SAC
determine operational statu equipment; repairs or repla	us, and assignces worn or	ns serviceability condit broken parts; rebuilds	tion codes t and fabrica	pair of medical and dental equipment; co to equipment; performs scheduled prevei tes equipment or components; modifies and inspects equipment; and maintains	ntive maintenance of medic equipment and installs new	al and dental equipment; inspect
Facility Management		# of FTE	0.5	0.5		SAC
The maintenance of a heal	th sites facili		and ground			
Central Sterile		# of FTE	0.0	0		
The decontamination, asse	embly, steriliz	zation and distribution o	of reusable	instrumentation. Also responsible for the	distribution of other sterile	products.
Dietary The ordering, maintenance nutritional consultations with			0.0 on of meals	0 s to inpatients, outpatients and staff. Nutr	itional oversight for these m	neals as well as
	provides re	# of FTE	1.0 ning the inte	1 erior of a facility at the highest level of cle uting, mending, washing, and processing		
Preventive Care						
Health Promotion / Disease Prevention (Preventive Care) The oversight of all prevention	tive care and	I health education prog	rams withir	n the facility. Education efforts will involv	e the public as well as the e	entire health system
, ,	orovide leade	,		their efforts to increase the health aware	ness of the public.	
Public Health Nursing		# of FTE	3.2	3.2		SAC
Public Health Nutrition		# of FTE	0.7	0.7		SAC
Environmental Health		# of FTE	0.0	0		
Health Education		# of FTE	0.0	0		
Additional Services						
Hostel Services		Rooms		-		
The provision of temporary	overnight a	ccommodations for fam	nily member	rs accompanying patients admitted to the	hospital.	
Case Management		# of FTE	0.0	0.0		
Case Management provide	s profession	al staff dedicated to ins	suring a col	ntinuum of care and follow up for chronic	ally ill or potentially chronica	ally ill patients.
CHR		# of FTE	2.0	2.0		
	entatives info			railable health services, make referrals to	appropriate agencies, and	assist PHN staff
with basic health care scre	ening. Also p	participate in health pro	motion acti	vities and health fairs.		



Delivery Plan

Establishes Projected workload and key characteristics per product line, while recommending a delivery option.

		Projected Need				Deliv	ery Options	5	
	Planned Direct	Key Characteristics	# Req'd		PSA			s due to shold	
Discipline	Care	(KC)	in 2015	On Site	On Site VP	CHS*	Srv Unit	Region	Remarks
Diabetes Program		# of FTE	0.0	0.0					
he Diabetes Program pro						spective dia	betic patient i	with preventi	ve education an
linical screening. The pro	ogram is sup			miniations an	d Podiatry care.				
Elder Care - Outreach		# of FTE	0.0					(ial formations a ba
Elder Care provides an ope ducation and health bene				itreach progr	am for the comm	nunity's eide	ers. Lunch alsi	tribution, soc	iai functions, ne
EMS	118	Loc #1 - # of FTE	0.0	0.0		118			
		# of Ambulances	0.0	0.0					
		Loc #2 - # of FTE	0.0	0.0					
		# of Ambulances	0.0	0.0					
		Loc #3 - # of FTE	0.0	0.0					
		# of Ambulances	0.0	0.0					
mergency Medical Servic					es of a service u	nit. Ambulai	nces are avail	able twenty-	four hours a day
even days a week, staffed	d with State	·							
Security	the enfatr of	# of FTE	0.0	0.0	reconnel It incl	ıdan nbusin	al accurity of	a a ricina lata	a comparing dispar
ecurity is responsible for rounds, and interiors of th	•	iu well bellig of flospita	i palierits, V	siturs, ariu pe	risonnen. It iricit	iues priysic	ar security of p	Darking IOIS,	surrounding
ransportation		# of FTE	0.0						
ransportation Department	t transnorts i			ed facilities w	ithin the service	unit and si	ırroundina citi	ies It include	s all the eynens
curred for automotive ope		•					-		
ribal Health Administr	ation	# of FTE	0.0	0.0					
ribal Health Administration			s quality he	alth services	for service unit r	esidents, w	hile encourag	ing more sel	f-reliance and
ersonal control over their	health and	quality of life.							
	trition screen	# of FTE	0.0	0.0	referral to neede	ed Commun	itv resources	for pregnant	hreastfeeding
VIC Program provides nut		ing, nutrition education	, supplemer	tal food and			-		<u>-</u> .
WIC Program provides nut postpartum women, infants Outreach Diabetes	s and childre	ing, nutrition education n <5 years of age who # of FTE	, supplemer meet incom	atal food and e guidelines (1.0	(185% poverty) a	and are four	nd to have a n	utritional risk	(.
WC Program provides nut oostpartum women, infants Outreach Diabetes Outreach Diabetes prograr	s and childre	ing, nutrition education n <5 years of age who # of FTE proper exercise and nu	, supplemer meet incom 1.0 trition leadir	tal food and e guidelines (1.0 g to a health	(185% poverty) a	and are four	nd to have a n	utritional risk	(.
MIC WIC Program provides nut postpartum women, infants Outreach Diabetes Outreach Diabetes prograr ransportation support, con	s and childre	ing, nutrition education n <5 years of age who # of FTE proper exercise and nu	, supplemer meet incom 1.0 trition leadir	tal food and e guidelines (1.0 g to a health	(185% poverty) a	and are four	nd to have a n	utritional risk	с.
WIC Program provides nut nostpartum women, infants Dutreach Diabetes Dutreach Diabetes program ransportation support, con Personal Care Attenda	m promotes and number of the second s	ing, nutrition education n <5 years of age who # of FTE proper exercise and nu pool screenings, exercise # of FTE	, supplement meet incoms 1.0 trition leading passes/pro	tal food and e guidelines (1.0) g to a health ograms and r. 0.0	(185% poverty) a v lifestyle for Nat utrition classes.	and are four	and to have a n	utritional risk	treach,
Outreach Diabetes Outreach Diabetes Outreach Diabetes program ransportation support, con Personal Care Attendants	m promotes promotes on the munity/school of the munity/school of the munity work with electric states.	ing, nutrition education n <5 years of age who # of FTE proper exercise and nu pool screenings, exercise # of FTE	, supplement meet incoms 1.0 trition leading passes/pro	tal food and e guidelines (1.0) g to a health ograms and r. 0.0	(185% poverty) a v lifestyle for Nat utrition classes.	and are four	and to have a n	utritional risk	treach,
VIC Program provides nut ostpartum women, infants Dutreach Diabetes Dutreach Diabetes program ransportation support, con Personal Care Attendants	m promotes promotes on the munity/school of the munity/school of the munity work with electric states.	ing, nutrition education n <5 years of age who # of FTE proper exercise and nu pool screenings, exercise # of FTE	, supplement meet incoms 1.0 trition leading passes/pro	tal food and e guidelines (1.0) g to a health ograms and r. 0.0	(185% poverty) a v lifestyle for Nat utrition classes.	and are four	and to have a n	utritional risk	c. treach,
VIC Program provides nut costpartum women, infants Dutreach Diabetes Dutreach Diabetes program ransportation support, con Personal Care Attendants Personal Care Attendants LDLs (Activities for Daily L	s and childre m promotes , nmunity/scho nts work with ele iving).	ing, nutrition education n <5 years of age who # of FTE proper exercise and nu pol screenings, exercise # of FTE derly and/or disabled No	, supplement meet incommet incommet incommet incomment i	1.0 g to a health ograms and r 0.0 eans following	(185% poverty) a y lifestyle for Nat utrition classes. y a stroke, medic	and are foul	ans through co	ommunity ou	treach,
Outreach Diabetes Outreach Diabetes Outreach Diabetes Outreach Diabetes programansportation support, conference Attendates Outreach Diabetes programansportation support, conference Attendates Outreach Diabetes programans	m promotes in more more more more more more more more	ing, nutrition education n <5 years of age who # of FTE proper exercise and nu pol screenings, exercise # of FTE derly and/or disabled No	, supplement meet income 1.0 1.0 trition leading passes/pro 0.0 ative America 0.0 g and educa	1.0 g to a health ograms and r 0.0 eans following 0.0 ation for Nativ	(185% poverty) a y lifestyle for Nat utrition classes. y a stroke, medic	and are foul	ans through co	ommunity ou	treach,
WIC Program provides nut costpartum women, infants Dutreach Diabetes Dutreach Diabetes program ransportation support, con Personal Care Attendats Personal Care Attendats DLS (Activities for Daily L Wellness Center Vellness Center provides a support or cooperation with	m promotes nmunity/scho nts work with ele iving). fitness equip	ing, nutrition education n <5 years of age who # of FTE proper exercise and nu pol screenings, exercise # of FTE derly and/or disabled No # of FTE proment, training, coachin programs as Elder Car	, supplement meet incommet inc	1.0 g to a health grams and r 0.0 cans following 0.0 ation for Nativ CHRs etc.	(185% poverty) a y lifestyle for Nat utrition classes. y a stroke, medic	and are foul	ans through co	ommunity ou	treach,
WIC Program provides nut postpartum women, infants outreach Diabetes Dutreach Diabetes program ransportation support, con Personal Care Attendants Personal Care Attendants ADLs (Activities for Daily L. Wellness Center Wellness Center provides apport or cooperation with Family Planning/Dome:	m promotes numerity/school nts work with electric viring).	ing, nutrition education n <5 years of age who # of FTE proper exercise and nu pol screenings, exercise # of FTE derly and/or disabled No # of FTE ment, training, coachin programs as Elder Car C # of FTE	1.0 trition leadire passes/pro 0.0 ative Americ 0.0 g and educate, Diabetes, 0.0	1.0 g to a health grams and n 0.0 cans following 0.0 ation for Natic CHRs etc. 0.0	y lifestyle for Natutrition classes. a a stroke, medic	and are fountive America cal procedur	ans through co	ommunity ou inction, visiti	treach, ng and assisting
WIC Program provides nut to stpartum women, infants outreach Diabetes program ransportation support, con Personal Care Attendar Personal Care Attendants ADLs (Activities for Daily Le Wellness Center provides support or cooperation with Family Planning/Domestic	m promotes in munity/scholonts work with eleviving). fitness equiph a such other stic Violence province and children in the violence and children in the vi	ing, nutrition education n <5 years of age who # of FTE proper exercise and nu pol screenings, exercise # of FTE derly and/or disabled No # of FTE proper exercise and nu programs as Elder Car c # of FTE proper exercise and nu programs as Elder Car c # of FTE proper exercise and nu programs as Elder Car c # of FTE proper exercise and nutries and an	1.0 trition leading passes/pro 0.0 ative America 0.0 g and educa e, Diabetes 0.0 n health thro	1.0 g to a health organism and r 0.0 eans following 0.0 ation for Nativ CHRs etc. 0.0 ough emphas	(185% poverty) a y lifestyle for Natutrition classes. a stroke, medic e Americans of izing benefits of	and are four tive America cal procedur all ages, ac	ans through co	ommunity ou inction, visitii an independ	treach, ng and assisting lent service or in
Outreach Diabetes Outreach Diabetes Outreach Diabetes Outreach Diabetes programansportation support, conference Attendants Outreach Diabetes programansportation support, conference Attendants Outreach Diabetes programansportation support, conference Attendants Outreach Care Attendants Outreach C	m promotes and promotes and promotes and promotes promotes proferrals for steep proferrals for steep proferrals for steep proferrals for steep proferrals promotes proferrals for steep proferrals for st	# of FTE derly and/or disabled No # of F	, supplement meet income 1.0 trition leading passes/pro 0.0 ative America 0.0 g and educate, Diabetes, 0.0 n health through for and pre-nata	1.0 g to a health or one of the second of th	(185% poverty) a y lifestyle for Nat utrition classes. a stroke, medic e Americans of izing benefits of ome visits to dis	and are fountive America cal procedur all ages, ac family plant cuss family	ans through co	ommunity ou inction, visitii an independ orting such o ds; as well a	treach, and assisting ent service or in emphases through
Outreach Diabetes Outreach Diabetes Outreach Diabetes Outreach Diabetes programansportation support, con Oersonal Care Attendants Observation Support of Care Attendants Obser	m promotes in munity/school ints work with electric violence profession of the provision of	# of FTE proper exercise and nu pol screenings, exercise # of FTE derly and/or disabled No # of FTE programs as Elder Car c # of FTE programs as Elder Car c # of FTE promotes Native Americal prize Italian procedures, as	, supplement meet income 1.0 trition leading passes/pro 0.0 ative America 0.0 g and educate, Diabetes, 0.0 n health through for and pre-nata	1.0 g to a health or one of the second of th	(185% poverty) a y lifestyle for Nat utrition classes. a stroke, medic e Americans of izing benefits of ome visits to dis	and are fountive America cal procedur all ages, ac family plant cuss family	ans through co	ommunity ou inction, visitii an independ orting such o ds; as well a	treach, and assisting ent service or in emphases through
Outreach Diabetes Outreach Diabetes Outreach Diabetes Outreach Diabetes programansportation support, con Personal Care Attendants Outreach Diabetes programansportation support, con Outreach Diabetes programansportation support, con Outreach Diabetes programans Outreach Care Attendants Outreach Diabetes Outreach Care Attendants Outreach Care At	m promotes in munity/school ints work with electric violence profession of the provision of	# of FTE proper exercise and nu pol screenings, exercise # of FTE derly and/or disabled No # of FTE programs as Elder Car programs as Elder Car programs Native Americal prilization procedures, a sion of shelters/safe hol AMI etc.	, supplement meet income 1.0 trition leading passes/pro 0.0 ative America 0.0 g and educate, Diabetes, 0.0 m health through pre-natauses and/or	1.0 g to a health ograms and round of the second of the se	(185% poverty) a y lifestyle for Nat utrition classes. a stroke, medic e Americans of izing benefits of ome visits to dis	and are fountive America cal procedur all ages, ac family plant cuss family	ans through co	ommunity ou inction, visitii an independ orting such o ds; as well a	treach, and assisting ent service or in emphases through
WIC Program provides nutrostpartum women, infants Outreach Diabetes Outreach Diabetes program ansportation support, con Personal Care Attendants OLS (Activities for Daily Landless Center provides a support or cooperation with a smally Planning/Domestic ducation, appointment religious forms with the programs such as WEAS/FAE	m promotes in munity/school ints work with electric iving). fitness equiph such other stic Violence proferrals for steach the provisitic, PHN, MI.	# of FTE proper exercise and nu pol screenings, exercise # of FTE derly and/or disabled No # of FTE proper exercise and nu pol screenings, exercise # of FTE derly and/or disabled No # of FTE proper as Elder Car programs as Elder Car c # of FTE proper Native Americal prilization procedures, a sion of shelters/safe how AMI etc. # of FTE	1.0 trition leadire passes/pre 0.0 ative Americ 0.0 g and educate, Diabetes 0.0 n health through	1.0 g to a health ograms and r 0.0 cans following 0.0 cation for Natio CHRs etc. 0.0 ough emphas d/post-natal h referrals to o	y lifestyle for Natutrition classes. a a stroke, medicate Americans of the Americans of the come visits to distinct the Domestic Visits to distinct the Domestic Visits to distinct the come visits to distinct the come visits to distinct the comestic Visits the comes	and are fountive America cal procedur all ages, ac family plant cuss family iolence ass	ans through co	ommunity ou an independ orting such eds; as well a es. Referral	treach, and assisting ent service or in emphases through s come through
Outreach Diabetes Outreach Diabetes Outreach Diabetes Outreach Diabetes programansportation support, con Oersonal Care Attendants Outreach Diabetes programansportation support, con Oersonal Care Attendants Outreach Diabetes programansportation support, con Oersonal Care Attendants Outreach Care	m promotes in munity/scholars equiping is such other stic Violence proferrals for steach the provision of th	# of FTE proper exercise and nu pol screenings, exercise # of FTE derly and/or disabled No # of FTE programs as Elder Car and FTE propers Native Americal prilization procedures, a prilization of shelters/safe hor programs as Elder Car programs as Elder Car and FTE propers Native Americal prilization of Shelters/safe hor programs as Elder Car programs as Elder Car and FTE propers Allord FTE Alcohol Education (FAE	1.0 trition leadire passes/pro 0.0 ative Americ 0.0 g and educe, Diabetes, 0.0 n health throad pre-natauses and/or 0.0 c) programs	1.0 g to a health ograms and r 0.0 ans following 0.0 ation for Natio CHRs etc. 0.0 augh emphas l/post-natal h referrals to o 0.0 oromote/supp	y lifestyle for Natutrition classes. If a stroke, medical a stroke, medical a stroke, medical a stroke and the stroke are Americans of the stroke are the stroke at the s	and are fountive Americal procedure all ages, actions family planticuss family iolence assignancies thr	ans through co	ommunity ou inction, visitii an independ orting such ods; as well a es. Referral	treach, and assisting ent service or in emphases through s lowering incide s come through
Outreach Diabetes Outreach Diabetes Outreach Diabetes Outreach Diabetes programansportation support, con Personal Care Attendants Outreach Diabetes programansportation support, con Personal Care Attendants Outreach Diabetes programansportation support, con Personal Care Attendants Outreach Care	m promotes in munity/school ints work with electronic iving). fitness equiph a such other stic Violence proferrals for steach other interesting the provision of the provision	# of FTE proper exercise and nu pol screenings, exercise # of FTE derly and/or disabled No # of FTE ment, training, coachin programs as Elder Car # of FTE monotes Native Americal prilization procedures, a sion of shelters/safe hou AMI etc. # of FTE Alcohol Education (FAE trisk. Developmental a	1.0 trition leadire passes/pre 0.0 ative Americ 0.0 g and educate, Diabetes 0.0 n health through the pre-natauses and/or 0.0 trition leadire 0.0 programs and/or diagn	1.0 g to a health ograms and r 0.0 ans following 0.0 ation for Natio CHRs etc. 0.0 augh emphas l/post-natal h referrals to o 0.0 oromote/supp	y lifestyle for Natutrition classes. If a stroke, medical a stroke, medical a stroke, medical a stroke and the stroke are Americans of the stroke are the stroke at the s	and are fountive Americal procedure all ages, actions family planticuss family iolence assignancies thr	ans through co	ommunity ou inction, visitii an independ orting such ods; as well a es. Referral	treach, and assisting ent service or in emphases through s lowering incides come through
WIC Program provides nutrostpartum women, infants Outreach Diabetes Outreach Diabetes program ansportation support, con Personal Care Attendants OLS (Activities for Daily Lambles Center provides in upport or cooperation with a camily Planning/Domestic ducation, appointment religible for the programs such as WEAS/FAE Fetal Alcohol Syndrome (Fersonal support to pregnamonmunity/individual education)	m promotes in munity/school ints work with electronic iving). fitness equiph a such other stic Violence proferrals for steach the provision of the provision o	# of FTE proper exercise and nu pol screenings, exercise # of FTE derly and/or disabled N # of FTE proper as Elder Car programs as Elder Car c # of FTE proper Stative Americal prolization procedures, a sion of shelters/safe how AMI etc. # of FTE Alcohol Education (FAE trisk. Developmental a upportive prevention ac # of FTE	1.0 trition leadire passes/pre 0.0 ative Americ 0.0 g and educate, Diabetes, 0.0 n health through the pre-natauses and/or 0.0 tip programs and/or diagnitivities. 0.0	1.0 g to a health ograms and r 0.0 cans following 0.0 ation for Nativ CHRs etc. 0.0 nugh emphas l/post-natal h referrals to o 0.0 promote/suppostical clinical	(185% poverty) a y lifestyle for Nat utrition classes. a a stroke, medic re Americans of izing benefits of ome visits to dis ther Domestic Vi port healthy preg Il functions include	and are fountive Americal procedure all ages, acceptable family planticuss family iolence assumancies three identifical	ans through co	ommunity ou an independ orting such e ds; as well a es. Referral	ent service or in emphases through s come through counseling and esearch,
Outreach Diabetes Outreach Diabetes Outreach Diabetes Outreach Diabetes programensportation support, conference Attendants Outreach Diabetes programensportation support, conference Attendants Outreach Diabetes programensportation support, conference Attendants Outreach Diabetes programens of Care Attendants Outreach Car	m promotes inmunity/scheints work with eleviving). fitness equiph is such other stic Violence proferrals for steady the provision (IC, PHN, MI. FAS) / Fetal A ant women a ation, and sunded programmed in the p	# of FTE proper exercise and nu pol screenings, exercise # of FTE derly and/or disabled No # of FTE proper as Elder Car programs as Elder Car programs as Elder Car and the screening procedures, as a sion of shelters/safe how AMI etc. # of FTE Alcohol Education (FAE trisk. Developmental as upportive prevention ac # of FTE m that works with "high	1.0 trition leadire passes/pre 0.0 ative Americ 0.0 g and educate, Diabetes 0.0 n health through a company of the company of t	1.0 g to a health ograms and n 0.0 cans following 0.0 ation for Nativ CHRs etc. 0.0 sugh emphas l/post-natal h referrals to o 0.0 promote/suppostical clinical 0.0 ant mothers,	y lifestyle for Natutrition classes. If a stroke, medical a strok	and are fountive Americal procedure all ages, acceptable family plant cuss family iolence assumancies three identifications of the process of the identification of the process of the identification	ans through control of the area of the are	ommunity ou ommunity ou onction, visiting an independent orting such eds; as well a es. Referral h, education, tistics and re-	ent service or in emphases through s come through counseling and esearch,
Outreach Diabetes Outreach Diabetes Outreach Diabetes Outreach Diabetes program Personal Care Attendants Outs (Activities for Daily L Vellness Center Vellness Center Vellness Center Outport or cooperation with Family Planning/Domestic ducation, appointment rel f domestic violence throug ther programs such as W FAS/FAE Fetal Alcohol Syndrome (F ersonal support to pregna formunity/individual educ MIAMI Project MIAMI Project MIAMI Project is a state fur interia defining "high risk"	m promotes inmunity/school ints work with electric iving). fitness equipment in such other stic Violence provise in the provise into the interval in the inte	# of FTE proper exercise and nu pol screenings, exercise # of FTE derly and/or disabled No # of FTE ment, training, coachin programs as Elder Car companies and procedures, a sicion of shelters/safe hot All etc. # of FTE Alcohol Education (FAE trisk. Developmental a upportive prevention ac # of FTE m that works with "high us birth weight, health I	1.0 trition leadire passes/pro 0.0 ative America 0.0 g and educate, Diabetes, 0.0 n health throcand pre-nata	atal food and e guidelines of 1.0 g to a health or	y lifestyle for Natutrition classes. If a stroke, medical a strok	and are fountive Americal procedure all ages, acceptable family plant cuss family iolence assumancies three identifications of the process of the identification of the process of the identification	ans through control of the area of the are	ommunity ou ommunity ou onction, visiting an independent orting such eds; as well a es. Referral h, education, tistics and re-	ent service or in emphases through s come through counseling and esearch,
WIC Program provides nut postpartum women, infants obstpartum support, con obstantial care Attendants obstantial care obst	m promotes inmunity/school ints work with electric iving). fitness equipment in such other stic Violence provise in the provise into the interval in the inte	# of FTE proper exercise and nu pol screenings, exercise # of FTE derly and/or disabled No # of FTE ment, training, coachin programs as Elder Car c # of FTE motes Native Americal erilization procedures, a sion of shelters/safe hou AMI etc. # of FTE Alcohol Education (FAE trisk. Developmental a upportive prevention ac # of FTE m that works with "high us birth weight, health is may lead to the birth o	1.0 trition leadire passes/pro 0.0 ative America 0.0 g and educate, Diabetes 0.0 n health thro and pre-natates and/or interest and/or diagnitivities. 0.0 risk" pregnatistory etc.), f a healthy of	atal food and e guidelines and in a land in a	y lifestyle for Natutrition classes. If a stroke, medical a strok	and are fountive Americal procedure all ages, acceptable family plant cuss family iolence assumancies three identifications of the process of the identification of the process of the identification	ans through control of the area of the are	ommunity ou ommunity ou onction, visitii an independ orting such e ds; as well a es. Referral h, education, tistics and re	ent service or in emphases through counseling and esearch,
Outreach Diabetes Dutreach Diabetes Dutreach Diabetes program ansportation support, con Personal Care Attendants ADLS (Activities for Daily L. Wellness Center provides and Personal Care provides and program or cooperation with Family Planning/Domestic ducation, appointment related from the programs such as Wellness Center to the programs such as Wellness Center for manify Planning/Domestic ducation, appointment related from the programs such as Wellness Center to programs such as Wellness Center to pregnation of the program o	m promotes in munity/scholars work with electric violence proferrals for steady the provision, and so a ation, and so anded progra (age, previous habits that	# of FTE proper exercise and nu pol screenings, exercise # of FTE derly and/or disabled Ni # of FTE ment, training, coachin programs as Elder Car c # of FTE motes Native Americal erilization procedures, a sion of shelters/safe hot AMI etc. # of FTE Alcohol Education (FAE trisk. Developmental a upportive prevention ac # of FTE m that works with "high us birth weight, health I may lead to the birth o # of FTE	1.0 trition leading passes/pro 0.0 ative America 0.0 g and educate, Diabetes, 0.0 n health through programs and/or diagnativities. 0.0 risk" pregnativities, f a healthy of 0.0	atal food and e guidelines and in a factor of the second o	If the style for Natural tribon classes. If a stroke, medical a s	and are fountive Americal procedure all ages, accurate and ages, accurate assistances through outrested, counselvented, counse	ans through co	ommunity out ommunity out an independ orting such a ds; as well a es. Referral h, education, tistics and re	treach, and assisting and assisting a
Outreach Diabetes Outreach Diabetes Outreach Diabetes Outreach Diabetes program Outreach Out	m promotes in munity/scholars work with electric violence proferrals for steep the provision, and women a ation, and so maded progra (age, previous habits that	# of FTE proper exercise and nu pol screenings, exercise # of FTE derly and/or disabled Ni # of FTE ment, training, coachin programs as Elder Car c # of FTE motes Native Americal erilization procedures, a sion of shelters/safe hot Alcohol Education (FAE t risk. Developmental a upportive prevention ac # of FTE m that works with "high us birth weight, health I may lead to the birth o # of FTE alth among post-cardiac	1.0 trition leading passes/pro 0.0 ative America 0.0 g and educate, Diabetes, 0.0 n health through a programs and/or diagn tivities. 0.0 risk" pregnantistory etc.), f a healthy of 0.0 c procedure	atal food and e guidelines and in a function of the second	y lifestyle for Natutrition classes. If a stroke, medical a strok	and are fountive Americal procedure all ages, accurate family plant cuss family inlances through outrested, counselvering from	ans through co	ommunity out ommunity out an independ orting such of ds; as well a es. Referral h, education, tistics and re- orted in acqu	ent service or in emphases through counseling and esearch, ttilizing standard uiring and

SAC + EMS Staff

38.9

Total FTE Staff

Resource Allocation Plan



Resource Allocation

Compares # of Key Characteristics (KC) required in 2015 to the Existing Key Characteristics. Existing data was collected from the site visit questionnaires. Also projects necessary Contract Health \$ by Service Line as determined in the Delivery Plan.

		Direct He	alth Care			Contr	act Healt	h Care
Discipline	Planned Projected	Key Characteristics (KC)	# Req'd in 2015	Exist KC (From Quest.)	% of Need	Planned Projected	Cost / Unit	Total CH Dollars
Primary Care	Provider Visits Only					Provider Visits Only		
Family Practice		Providers	0.5	0.0	0%	0	\$58	\$0
Talliny Tradado	•	ers to outlying areas.	0.0	0.0	0 /0	Ü	ΨΟΟ	ΨΟ
	•	Provider Offices	1.0	0.0	0%			
		Exam Rooms	2.0	0.0	0%			
Internal Medicine	0	Providers	0.0	0.0	100%	0	\$58	\$0
	Visiting Provid	ers to outlying areas.						
		Provider Offices	0.0	0.0	100%			
		Exam Rooms	0.0	0.0	100%			
Pediatric		Providers	0.0	0.0	100%	0	\$54	\$0
		ers to outlying areas.						
		Provider Offices	0.0	0.0	100%			
		Exam Rooms	0.0	0.0	100%			
Ob/Gyn		Providers	0.0	0.0	100%	0	\$261	\$0
		ers to outlying areas.	0.0	0.0	4000/			
		Provider Offices	0.0	0.0	100%			
Drimon, Coro Total	0.004	Exam Rooms	0.0	0.0	100%	0		C O
Primary Care Total		Providers Provider Offices	0.5	0.0 0.0	0%	U		\$0
		port (RN+LPN+CNA)	1.0 0.8	0.0	0% 0%			
	Nursing Sup	Exam Rooms	2.0	0.0	0%			
		Dept. Gross Sq. Mtrs		0.0	0%			
		Dept. 01033 5q. Mitis	140.0	0.0	0 /6			
Emergency Care	0	ER Providers	0.0	0.0	100%	0	\$247	\$0
Emorgoney care		g Support (RN+LPN)		0.0	100%		Ψ= 17	4.0
		Patient Spaces	0.0	0.0	100%			
		Dept. Gross Sq. Mtrs		0.0	100%			
	Provider Visits	<u> </u>				Provider Visits		
Specialty Care	Only					Only		
Orthopedics		Providers	0.0	0.0	100%	0	\$226	\$0
	Visiting Provid	ers to outlying areas.	0.0	0.0	4000/			
		Provider Offices	0.0	0.0	100%			
On bith almost a sur		Exam Rooms	0.0	0.0	100%	0	ድጋርር	C O
Ophthalmology		Providers	0.0	0.0	100%	0	\$292	\$0
	Visiting Provid	ers to outlying areas. Provider Offices	0.0	0.0	100%			
		Exam Rooms	0.0	0.0	100%			
Dermatology	0	Providers	0.0	0.0	100%	0	\$135	\$0
Definational		ers to outlying areas.	0.0	0.0	100/0	J	ψ100	ΨΟ
	•	Provider Offices	0.0	0.0	100%			
		Exam Rooms	0.0	0.0	100%			
General Surgery	0	Providers	0.0	0.0	100%	0	\$187	\$0
3. 7.		ers to outlying areas.					•	
		Provider Offices	0.0	0.0	100%			
		Exam Rooms	0.0	0.0	100%			
Otolaryngology		Providers	0.0	0.0	100%	0	\$191	\$0
: 2 - 1	Visiting Provid	ers to outlying areas.						
		Provider Offices	0.0	0.0	100%			
		Exam Rooms	0.0	0.0	100%			
Cardiology		Providers	0.0	0.000	100%	0	\$231	\$0
	Visiting Provid	ers to outlying areas.						
		Provider Offices	0.0	0.0	100%			
		Exam Rooms	0.0	0.0	100%			
Urology		Providers	0.0	0.0	100%	0	\$187	\$0
		ers to outlying areas.						
		Provider Offices	0.0	0.0	100%			
		Exam Rooms	0.0	0.0	100%			

Resource Allocation Plan



Resource Allocation

Compares # of Key Characteristics (KC) required in 2015 to the Existing Key Characteristics. Existing data was collected from the site visit questionnaires. Also projects necessary Contract Health \$ by Service Line as determined in the Delivery Plan.

	Direct Health Care						Contract Health Care			
				Exist KC						
	Planned	Key Characteristics	# Req'd in	(From		Planned	Cost /	Total CH		
Discipline	Projected	(KC)	2015	Quest.)	% of Need	Projected	Unit	Dollars		
Neurology	0	Providers	0.0	0.000	100%	0	\$198	\$0		
3,	Visiting Provid	ders to outlying areas.								
	-	Provider Offices	0.0	0.0	100%					
		Exam Rooms	0.0	0.0	100%					
Other Subspecialties						0	\$571	\$0		
Nephrology		Providers	0.0	0.0	100%					
		ders to outlying areas.			10070					
	J	Provider Offices	0.0		100%					
		Exam Rooms	0.0		100%					
Allergy	· -	Providers	0.0	0.0	100%					
- 37		ders to outlying areas.								
	J	Provider Offices	0.0		100%					
		Exam Rooms	0.0		100%					
Pulmonology		Providers	0.0		100%					
3,		ders to outlying areas.								
	3 .	Provider Offices	0.0		100%					
		Exam Rooms	0.0		100%					
Gerontology		Providers	0.0		100%					
3,7		ders to outlying areas.								
	J	Provider Offices	0.0		100%					
		Exam Rooms	0.0		100%					
Gastroenterology	· · ·	Providers	0.0		100%					
ouch come onegy		ders to outlying areas.	0.0		10070					
	v.og o v.o	Provider Offices	0.0		100%					
		Exam Rooms	0.0		100%					
Rheumatology			0.0		100%					
· ····ca····atc··cgy		ders to outlying areas.	0.0		10070					
	violang i rovic	Provider Offices	0.0		100%					
		Exam Rooms	0.0		100%					
Oncology	· -	Providers	0.0		100%					
2235	Visiting Providers to outlying areas.		0.0		10070					
	Provider Offices		0.0		100%					
	Exam Rooms		0.0		100%					
Pediatric-Genetics			0.0		100%					
i calatile concileo	Visiting Providers to outlying areas.		0.0		10070					
	violarig i rovio	Provider Offices	0.0		100%					
		Exam Rooms	0.0		100%					
Traditional Healing	· 	Providers	1.0		0%					
Traditional Floating		Provider Offices	1.0		0%					
		Exam Rooms	1.0		0%					
Podiatry Visits	0	Podiatrists	0.0	0.0	100%	0	\$0	\$0		
. Caldity Violity	_	ders to outlying areas.	0.0	0.0	100/0	J	Ψυ	ΨΟ		
	. 10119 1 10410	Podiatry Offices	0.0	0.0	100%					
		Exam Rooms	0.0	0.0	100%					
Specialty Care Sub-Total	0	Exam Rooms	1.0	0.0	0%	0		\$0		
Specially Said Sub-Total		Provider Offices	1.0	0.0	0%	V		Ψ		
		Dept. Gross Sq. Mtrs		0.0	0%					
T. I. II	0.004									
Total In-House Providers	2,391	Providers	1.5	0.0	0%					
Visiting Professional Clinic	1,030	Exam	1.0	0.0	0%					
-		Provider Offices	1.0	0.0	0%					
		Dept. Gross Sq. Mtrs	73.0	0.0	0%					
-										

Resource Allocation Plan



Resource Allocation

Compares # of Key Characteristics (KC) required in 2015 to the Existing Key Characteristics. Existing data was collected from the site visit questionnaires. Also projects necessary Contract Health \$ by Service Line as determined in the Delivery Plan.

		Direct Hea	alth Care			Conti	ract Health	n Care
Discipline	Planned Projected	Key Characteristics (KC)	# Req'd in 2015	Exist KC (From Quest.)	% of Need	Planned Projected	Cost / Unit	Total CH Dollars
Other Ambulatory Care Services								
Dental Service Minutes	85,405	Dentists	0.8	0.0	0%	0	\$0	\$0
Dental Service Minutes		ders to outlying areas.	0.6	0.0	U /o	U	φU	φU
	visiting i lovic	Hygenists	0.4		0%			
		Dental Chair	2.0	0.0	0%			
		Dept. Gross Sq. Mtrs	82.0	0.0	0%			
Optometry Visits	0	Optometrist	0.0	0.0	100%	0	\$0	\$0
Optometry visits		ders to outlying areas.	0.0	0.0	100 /6	U	ΨΟ	ΨΟ
	Visiting Flovid	Provider Offices	0.0	0.0	100%			
		Eye Lanes	0.0	0.0	100%			
		•	0.0	0.0	100%			
Dialysis Patients	0	Dept. Gross Sq. Mtrs Dialysis Stations	0.0	0.0	100%	0	\$856	\$0
Dialysis Fallerits	U	Dept. Gross Sq. Mtrs	0.0	0.0	100%	U	φουσ	φυ
Audiology Visits	0	Audiologists	0.0	0.0	100%	0	\$304	\$0
Addiblogy visits	~	ders to outlying areas.	0.0	0.0	100%	U	φ30 4	φυ
	Visiting Flovid		0.0	0.0	100%			
		Audiologist Offices		0.0				
		Audiology Booths	0.0	0.0	100%			
		Dept. Gross Sq. Mtrs	0.0	0.0	100%			
Behavioral Health	_							
Mental Health Visits		Counselors	1.1	0.0	0%			
Psychiatry		Counselors	0.0	0.0	100%			
Social Service Visits		Counselors	0.5	0.0	0%			
Alcohol & Substance Abuse		Counselors	0.6	0.0	0%			
Behavioral Health Total		Total Counselors	2.2	0.0	0%	0	\$0	\$0
	Visiting Provid	ders to outlying areas.						
		Counselor Offices	3.0	0.0	0%			
		Dept. Gross Sq. Mtrs	78.0	0.0	0%			
npatient Care						Inn	atient CHS	\$ are at S
Births	0	LDRPs	0.0	0.0	100%	0	\$2,859	\$0
		Dept. Gross Sq. Mtrs	0.0	0.0	100%		+= ,	• •
Obstetric Patient Days	0	Post Partum beds	0.0	0.0	100%	0		
		Dept. Gross Sq. Mtrs	0.0	0.0	100%			
Neonatology Patient Days	0	# of Bassinets	0.0	0.0	100%	0	\$1,203	\$0
teenateregy : attent 2 aye		Dept. Gross Sq. Mtrs	0.0	0.0	100%		Ψ.,=σσ	40
Pediatric Patient Days	0	# of Beds	0.0	0.0	100%	0	\$1,203	\$0
calatile : allein Baye		Dept. Gross Sq. Mtrs	0.0	0.0	100%		ψ.,=σσ	Ψū
Adult Medical Acute Care	0	# of Beds	0.0	0.0	100%	0	\$827	\$0
tadit Medical / todie eare	· ·	Dept. Gross Sq. Mtrs	0.0	0.0	100%	Ü	ΨΟΖΙ	ΨΟ
Adult Surgical Acute Care	0	# of Beds	0.0	0.0	100%	0	\$827	\$0
San Cargical Acute Care	J	Dept. Gross Sq. Mtrs	0.0	0.0	100%	- 0	ΨυΖΙ	ΨΟ
ntensive Care Patient Days	0	# of Beds	0.0	0.0	100%	0	\$827	\$0
monore care i allent bays	J	Dept. Gross Sq. Mtrs	0.0	0.0	100%	0	ΨυΖΙ	ΨΟ
Psychiatric Patient Days	0	# of Beds	0.0	0.0	100%	0	\$335	\$0
Systilation attent Days	U	Dept. Gross Sq. Mtrs	0.0	0.0	100%	U	ψυυυ	ΨΟ
Medical Detox Patient Days	0	# of Beds	0.0		100%	0	\$399	\$0
vicultal Delox Fallelli Days	U	Dept. Gross Sq. Mtrs	0.0		100%	U	ψυσσ	ΨΟ
Sub Acute/Transitional Care	0	# of Beds	0.0	0.0				
Sub Acute/ Harisilional Care	U				100% 100%			
protiont Caro Total	0	Dept. Gross Sq. Mtrs		0.0		0		\$0
npatient Care Total	0	# of patient beds Dept. Gross Sq. Mtrs	0 0	0 0	100% 100%	0		ΦU

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Resource Allocation Plan



Resource Allocation

Compares # of Key Characteristics (KC) required in 2015 to the Existing Key Characteristics. Existing data was collected from the site visit questionnaires. Also projects necessary Contract Health \$ by Service Line as determined in the Delivery Plan.

		Direct Hea	alth Care			Contr	act Healtl	n Care
Discipline	Planned Projected	Key Characteristics (KC)	# Req'd in 2015	Exist KC (From Quest.)	% of Need	Planned Projected	Cost / Unit	Total CH Dollars
Ancillary Services								
Laboratory Services								
Clinical Lab	3,474	Tech staff @ peak	0.4	0.0	0%	-		
Microbiology Lab	0	Tech staff @ peak	0.0	0.0	100%			
Blood Bank	0	Tech staff @ peak	0.0	0.0	100%			
Anatomical Pathology	0	Tech staff @ peak	0.0		100%			
Lab Total	3,474	Tech staff @ peak	0.4	0.0	0%	0	\$175	\$0
		Dept. Gross Sq. Mtrs	8.0	0.0	0%			
Pharmacy	9,077	Pharmacists	0.4	0.0	0%	0	\$0	\$0
		Dept. Gross Sq. Mtrs	21.1	0.0	0%			
Acute Dialysis	0	Rooms	0.0	0.0	100%			
		Dept. Gross Sq. Mtrs	0.0	0.0	100%	-		
Diagnostic Imaging		-						
Radiographic exams	0	Rooms	0.0	0.0	100%	0	\$205	\$0
Ultrasound Exams	0	Rooms	0.0	0.0	100%	0	\$227	\$0
Mammography Exams	0	Rooms	0.0	0.0	100%	0	\$57	\$0
Fluoroscopy Exams	0	Rooms	0.0	0.0	100%	0	\$62	\$0
CT	0	Rooms	0.0	0.0	100%	0	\$602	\$0
MRI exams	0	Rooms	0.0	0.0	100%	0	\$813	\$0
Diagnostic Imaging Total	0	Radiologists	0.0	0.0	100%	0		\$0
		Dept. Gross Sq. Mtrs	0.0	0.0	100%		0=11	
Nuclear Medicine	0	Rooms	0.0	0.0	100%	0	\$511	\$0
	0	Dept. Gross Sq. Mtrs	0.0		100%			
Radiation Oncology	0	Rooms	0.0		100%			
Ob a man of the arrangement	0	Dept. Gross Sq. Mtrs	0.0		100%	0	#770	Φ0
Chemotherapy	0	Patient Spaces	0.0		100%	0	\$779	\$0
Dahahilitatian Camilaas		Dept. Gross Sq. Mtrs	0.0		100%			
Rehabilitation Services PT Visits		Thorony CTC	0.0	0.0	100%			
OT Visits		Therapy FTE		0.0				
Speech Therapy Visits		Therapy FTE Therapy FTE	0.0	0.0	100% 100%			
Rehab Total	0	Therapy FTE	0.0	0.0	100%	0	\$210	\$0
Nellab Total	U	Dept. Gross Sq. Mtrs	0.0	0.0	100%	U	φ210	ΨΟ
RT Workload Minutes	0	Therapy FTE	0.0	0.0	100%	0		\$0
TT Workload Williates	U	Dept. Gross Sq. Mtrs	0.0	0.0	100%	U		ΨΟ
Cardiac Catherization	0	Rooms	0.0	0.0	100%	0	\$2,503	\$0
Cardiac Catherization	U	Dept. Gross Sq. Mtrs	0.0		100%	U	Ψ2,000	ΨΟ
Surgery		Dept. Oross oq. Mirs	0.0		10070	-		
Outpatient Endoscopy Cases	0	Endoscopy Suites	0.0	0.0	100%	0	\$1.220	\$0
Outpatient Surgery Cases	0	Outpatient ORs	0.0	0.0	100%	0	\$1,220	\$0
Inpatient Surgical Cases	0	Inpatient ORs	0.0	0.0	100%	0	Ţ., 	\$0
pation. Julyiou Judeo		# of Pre-Op Spaces	0.0	0.0	100%			70
		# of PACU Spaces	0.0	0.0	100%			
		# of Phase II Spaces	0.0	0.0	100%			
Surgical Case Total	0	# of ORs	0.0	0.0	100%	0		\$0
3		Dept. Gross Sq. Mtrs	0.0	0.0	100%			• •
		,						
Administrative Support								
Administration		# of FTE	2.5	0.0	0%			
		Dept. Gross Sq. Mtrs	47.5	0.0	0%			
Information Management		# of FTE	1.0	0.0	0%			
		Dept. Gross Sq. Mtrs	17.3	0.0	0%			
Health Information Mngmt.		# of FTE	4.2	0.0	0%			
Description of Off		Dept. Gross Sq. Mtrs	32.3	0.0	0%			
Business Office		# of FTE	2.0	0.0	0%			
Combine at 11a - 14b		Dept. Gross Sq. Mtrs	30.0	0.0	0%			
Contract Health		# of FTE	1.2	0.0	0%			
		Dept. Gross Sq. Mtrs	18.0	0.0	0%			

Resource Allocation Plan



Resource Allocation

Compares # of Key Characteristics (KC) required in 2015 to the Existing Key Characteristics. Existing data was collected from the site visit questionnaires. Also projects necessary Contract Health \$ by Service Line as determined in the Delivery Plan.

Planned Projected Planned Projected Planned Projected Planned Projected Projected Planned Projected Projected Planned Projected Projected Planned Projected Planned Projected Planned Projected Planned Projected Projected Planned Projected Planned Projected Projected Projected Projected Planned Projected Proj	Direct Hea				alth Care			act Healtl	n Care
# of FTE	Discipline			-	(From	% of Need			Total CH Dollars
Dept. Gross Sq. Mtrs	Facility Support Services								
# of FTE	Clinical Engineering		# of FTE	0.5	0.0	0%			
Dept. Gross Sq. Mtrs									
Dept. Gross Sq. Mtrs	Facility Management								
Dept. Gross Sq. Mtrs									
# of FTE	Central Sterile								
Dept. Gross Sq. Mtrs	~· .								
# of FTE	Dietary								
Dept. Gross Sq. Mtrs	Proporty & Cupply								
Housekeeping & Linen	Property & Supply								
Dept. Gross Sq. Mtrs 3.3 0.0 0%	Housekooping & Linon								
Preventive Care	lousekeeping & Linen								
Public Health Nursing Visiting Providers to outlying areas. Dept. Gross Sq. Mtrs 56.3 0.0 0% Public Health Nutrition	Preventive Care								
Visiting Providers to outlying areas. Dept. Gross Sq. Mtrs S6.3 0.0 0%			# of FTE	3 2	0.0	0%			
Dept. Gross Sq. Mtrs	abile Health Huroling			0.2	0.0	0 /0			
Public Health Nutrition		violarig i rovia	, ,	56.3	0.0	0%			
Visiting Providers to outlying areas. Dept. Gross Sq. Mtrs 8.3 0.0 0%	Public Health Nutrition								
Horizon		Visiting Provid	lers to outlying areas.						
Dept. Gross Sq. Mtrs		J	Dept. Gross Sq. Mtrs	8.3	0.0	0%			
Health Education	Environmental Health	·	# of FTE	0.0	0.0	100%			
Dept. Gross Sq. Mtrs			Dept. Gross Sq. Mtrs	0.0	0.0	100%			
# of FTE	Health Education		# of FTE	0.0	0.0	100%			
Visiting Providers to outlying areas. Dept. Gross Sq. Mtrs 0.0 0.0 100%		·							
Dept. Gross Sq. Mtrs	Case Management			0.0	0.0	100%			
# of FTE		Visiting Provid	, ,						
Dept. Gross Sq. Mtrs 27.2 0%									
Diabetes Program	CHR				0.0				
Dept. Gross Sq. Mtrs 0.0 100%	Disk stee December				0.0				
Wellness Center # of FTE Dept. Gross Sq. Mtrs 0.0 0.0 100% WIC # of FTE Dept. Gross Sq. Mtrs 0.0 0.0 100% Additional Services - IHS Supported Rooms Dept. Gross Sq. Mtrs 0.0 100% Hostel Services Rooms Dept. Gross Sq. Mtrs 0.0 100% EMS # of FTE # 0.0 100% 100% EMS # of Ambulances 0.0 100% 100% Dept. Gross Sq. Mtrs 0.0 100% 100% Security # of FTE 0.0 100% Dept. Gross Sq. Mtrs 0.0 100% 100% Transportation # of FTE 0.0 100% Dept. Gross Sq. Mtrs 0.0 100% 0 \$0 Total FTE Staff - IHS or IHS 638 RRM Supported 31.0 0.0 0% Total Building Gross Square Meters 1,055 0 0%	Diabetes Program				0.0				
Dept. Gross Sq. Mtrs	Nollness Center								
WIC	Weilness Center								
Dept. Gross Sq. Mtrs 0.0 100%	MIC								
Additional Services - IHS Supported Hostel Services	WIC								
Hostel Services	Additional Services - IHS Sur	nnorted							
Dept. Gross Sq. Mtrs		- p <u>ortou</u>	Rooms	0.0		100%	-		
# of FTE	100tol Oci vioco								
# of Ambulances	EMS						118	\$0	\$0
Dept. Gross Sq. Mtrs							1.13	Ψυ	ΨΟ
# of FTE									
Dept. Gross Sq. Mtrs	Security								
Transportation # of FTE 0.0 100% 0 \$0 Dept. Gross Sq. Mtrs 0.0 100% 100% Total FTE Staff - IHS or IHS 638 RRM Supported 31.0 0.0 0% Total Building Gross Square Meters 1,055 0 0% Substance Abuse Non-	•		Dept. Gross Sq. Mtrs	0.0		100%			
Total FTE Staff - IHS or IHS 638 RRM Supported 31.0 0.0 0% Total Building Gross Square Meters 1,055 0 0% Substance Abuse Non-	Transportation					100%	0	\$0	\$0
Total Building Gross Square Meters 1,055 0 0% Substance Abuse Non-			Dept. Gross Sq. Mtrs	0.0		100%			
Substance Abuse Non-	Total FTE Staff - IHS or IHS	638 RRM Sur	pported	31.0	0.0	0%			
	Total Building Gross Squa	re Meters		1,055	0	0%			
Adult Residential Treatment # of Beds 0.6 Dept. Gross Sq. Mtrs 37.5		159							

Resource Allocation Plan

Planned

Projected



Total CH

Dollars

\$0

Contract Health Care

Cost /

Unit

Resource Allocation

Compares # of Key Characteristics (KC) required in 2015 to the Existing Key Characteristics. Existing data was collected from the site visit questionnaires. Also projects necessary Contract Health \$ by Service Line as determined in the Delivery Plan.

questionnaires. Also projects ne	` ' '							
		Direct Hea	alth Care					
Discipline	Planned Projected	Key Characteristics (KC)	# Req'd in 2015	Exist KC (From Quest.)	% of Need			
Adolescent Residential	38	# of Beds	0.1		0%			
Treatment	Treatment Dept. Gross Sq. Mtrs				0%			
Substance Abuse Transitional	6	# of Beds	1.1		0%			
Care	Care Dept. Gross Sq. Mtrs				0%			
Total SANAC - Building Gross Square Meters 100 0								
Additional Services - Non-IHS Supported								
Elder Care								
Nursing Home	0	# of patient beds	0.0	0.0	100%			
		Bldg. Gross Sq. Mtrs.	0.0	0.0	100%			

Elder Care							
Nursing Home	0	# of patient beds	0.0	0.0	100%		
		Bldg. Gross Sq. Mtrs	0.0	0.0	100%		
Assisted Living	0	# of patient beds	0.0	0.0	100%		
		Bldg. Gross Sq. Mtrs.	0.0	0.0	100%		
Hospice	0	# of patient beds	0.0	0.0	100%		
		Bldg. Gross Sq. Mtrs.	0.0	0.0	100%		
Outreach Elder Care		# of FTE	0.0		100%		
		Bldg. Gross Sq. Mtrs.	0.0		100%		
Home Health Care	0	# of Home Health	0.0	0.0	100%	0	\$3,425
Home Health Care	U	Care FTE	0.0	0.0	100%	U	φ3,425
		Bldg. Gross Sq. Mtrs.	0.0	0.0	100%		
Elder Care Total	0	# of patient beds	0	0	100%		
		Bldg. Gross Sq. Mtrs.	0	0	100%		

Total Elder Care - Building Gro	ss Square Meters	0	0	100%
Miscellaneous Services				
Tribal Health Administration	# of FTE	0.0	0.0	100%
	Dept. Gross Sq. Mtrs	0.0		100%
Outreach Diabetes	# of FTE	1.0		0%
	Bldg. Gross Sq. Mtrs.	13.6		0%
MIAMI	# of FTE	0.0		100%
	Bldg. Gross Sq. Mtrs.	0.0		100%
Personal Care Attendants	# of FTE	0.0	0.0	100%
	Bldg. Gross Sq. Mtrs.	0.0	0.0	100%
Family Planning/Domestic	# of FTE	0.0		100%
Violence	Bldg. Gross Sq. Mtrs.	0.0		100%
FAS/FAE	# of FTE	0.0		100%
	Bldg. Gross Sq. Mtrs.	0.0		100%
Cardiac Rehab	# of FTE	0.0		100%
	Bldg. Gross Sq. Mtrs.	0.0		100%
Other	# of FTE		0.0	100%
	Bldg. Gross Sq. Mtrs.	0.0	0.0	100%
Other	# of FTE			100%
	Bldg. Gross Sq. Mtrs.	0.0	0.0	100%
Miscellaneous Services Buildin	g Gross Square Mtrs	14	0	0%
Grand Total - Total Building Gr	oss Square Meters	1,168	0	0%

Contract Health	\$0
Dollars Sub-Total	φυ
Other Expenditures -	00
Contract Health	\$0
Inflation Adjusted	C O
CHS \$ - Total	\$0